7 easy at-home health checks that can **SAVE YOUR LIFE** PAGE 130

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June/July 2010
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Reader's Digest

COLUMNS

DEPARTMENTS

CARIN BAER/FOX; PHOTOGRAPHED BY ROBERT SEBREE


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Grilling Secrets

Check out the quick-and-easy recipes on page 187, then go online for more. You'll find tasty marinades, can't-fail BBQ tips, and creative ways to cook up burgers, fish, and vegetables. It's all at **readersdigest.com/bbq**.

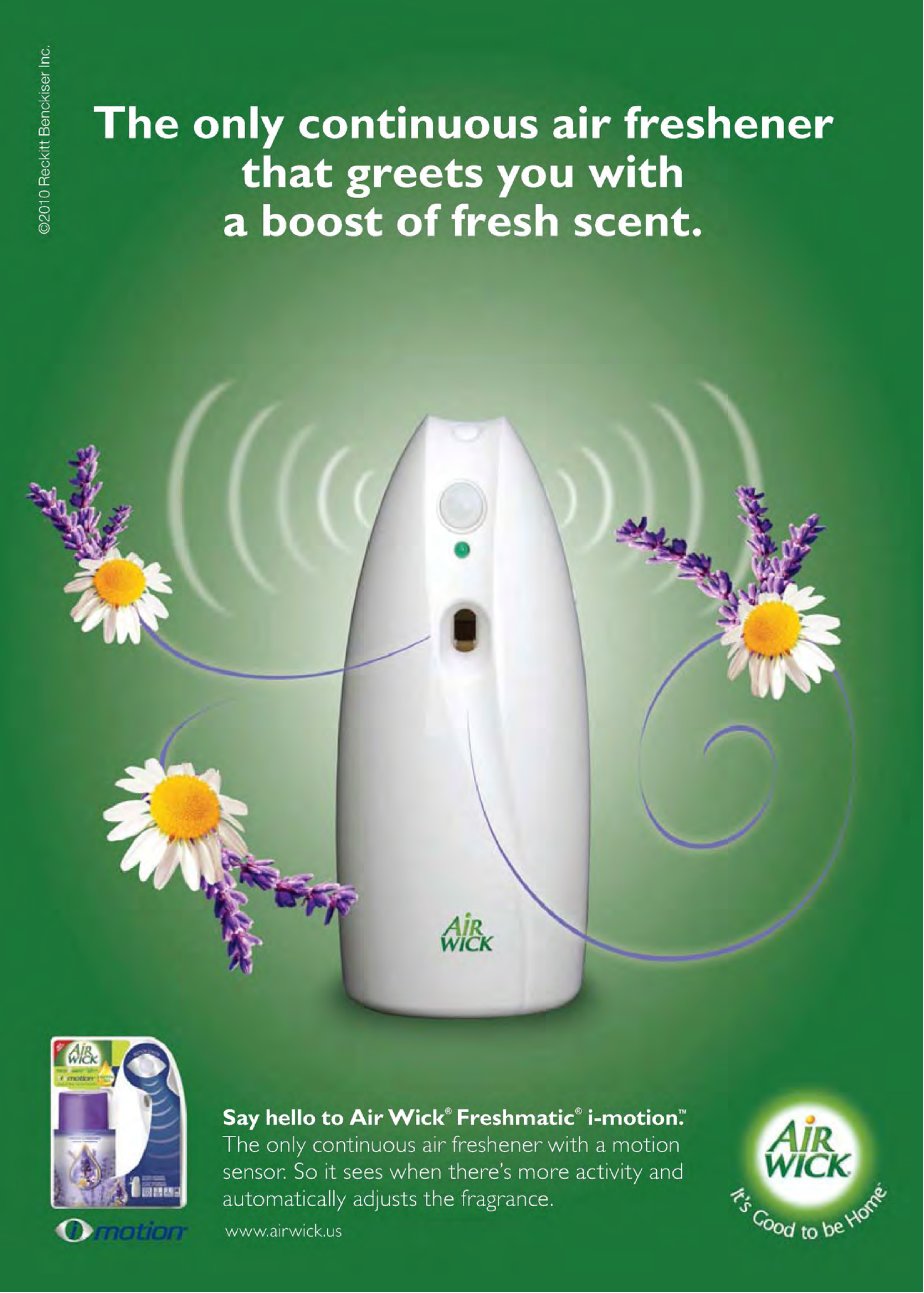
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React

LETTERS ON THE APRIL ISSUE

Grudge Match

I wholeheartedly agree with Bob Brody ("Is It Just Me?"). Sometimes forgiving is neither justified nor satisfying. After eight years of being harassed by bill collectors looking for a now ex-friend who ignored my requests to stop using me as a reference, I gave up and ended our friendship. Some people believe that if they say they're sorry every time they transgress, all will be forgiven. Wrong! The only way to teach these people that friendship has limits is to refuse to forgive them.

Janet Loftis, Oakland, California

Brody's essay on forgiving struck a chord. Staying mad, to a point, is part of the process. But over time, a grudge drains us, steals our peace, makes us run in circles. Eventually, we must forgive everyone for past wrongs—perhaps not verbally or in person but in our hearts and minds—if we are to have peace. If not, you'll be tied to the people who



wronged you for as long as you hold the grudge. I don't benefit from imagining consequences for the offender. But I do get gratification from spending my energies on my children, my family, the people who are a positive force in my life!

Tom Russell, Creve Coeur, Illinois

To forgive is not to condone the offense, to say it made no difference, or to license its repetition. Rather, forgiveness is a decision to no longer hold an offense against another person or group. It's a choice, just like love. Choose wisely!

Robin Harford, Ketchikan, Alaska

Tough to Swallow

Christie Aschwanden cites studies that show multivitamins are of little use but fails to tell readers about other research that suggests benefits ("Vitamin Truths and Lies"). Some studies, for instance, suggest a lowered risk of dementia in older adults with high-normal

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B_{12} levels, which is easily raised by supplementation.

Les Peterson, Arlington, Washington



A popular 1930s family radio program, *Lum and Abner* had one episode that mentioned vitamins. Lum (the straight man) was explaining to Abner the value of eating food containing vitamins. Abner, in his humble, inquisitive manner, wanted to know more about vitamins. Lum told him, "You can't see 'em, or taste 'em, or feel 'em, but you gotta have 'em." Abner's response was that consuming vitamins seemed like "eating a hole in the air." I have thought of that all these many years since.

James F. Arndt, San Luis Obispo, California

Aschwanden made no attempt to help the reader sort out contradictory claims; in fact, helpful information that might have made looking objectively at the studies quoted was omitted. What do you want us to do? Trust the medical establishment implicitly? I'm going to think for myself, thank you. *C. I.,* via Internet

Editor's Note: We applaud independent thinking! That's why we re-

PERFECT PRESENTS FOR MOM AND DAD THE READER'S DIGEST VERSION

This month, we asked our e-mail panel to tell us the Mother's or Father's Day present they'd most like to receive—other than a subscription to *Reader's Digest,* of course.

- My choice of movie, no arguing. *F. P.,* Lafayette, Indiana
- Having my children and grandchildren surprise me at church and fill up two pews. *N. R.,* Homer, Michigan
- Cherry pie. I just love cherry pie. *J. H.,* Fort Wayne, Indiana
- A heartfelt letter. *L. S.,* San Antonio, Texas
- A homemade CD of a rap by my sons about what a great mom I am. *M. G.,* Gardendale, Alabama
- A porch swing, installed. *K. F.,* South Charleston, West Virginia
- A home-cooked meal by someone else. *M. H.,* Miami, Florida
- An Apple iPad 3G. *S. S.,* Berwick, Maine
- A clean house and happy kids. *D. S.,* Colorado Springs, Colorado
- My son home from Iraq. *J. K.,* Charlotte, North Carolina
- Winning a *Reader's Digest* sweepstakes so I can catch up on all my bills. *A. W.,* Alexandria, Virginia

Want your opinion heard? Join Our Connection, the *Reader's Digest* Reader Panel, and take part in short surveys. Sign up at readersdigestconnection.com and register to win $30,000.

ILLUSTRATED BY BILL LEE

ported what the research shows (as we've done numerous times in articles that have raised concerns about drugs and other medical interventions). In fact, before award-winning science journalist Christie Aschwanden reached her conclusions, she carefully assessed piles of well-designed, peer-reviewed studies—50 or more—and interviewed many of the most respected researchers in this field. Remember that we're not recommending you kick all supplements to the curb. For example, it's a good idea for women of reproductive age to take a daily multivitamin, and there's lots of evidence suggesting that everyone could benefit from taking a vitamin D supplement. Also note that we looked just at vitamins—not at minerals and not at supplements such as fish oil, both of which may be worth taking for some people. Stay tuned for future stories on supplements that can be beneficial—and on others you can safely skip.

Kindled Spirits

I just finished my first *Reader's Digest* via Kindle, and I actually got a little teary. My grandfather bought my sister and me a subscription every year for Christmas for as long as I can remember. He passed away, so we don't get them now, but today I think he's smiling. I love it! *C. W.*, via Internet

***Reader's Digest* is the only magazine** I have on my Kindle. It reads similar to the printed version. Keep up the good work. *James Jones*, Phoenix, Arizona

I'm so grateful to have *Reader's Digest* on my Kindle! It has been a favorite magazine since I was a child, one I was sure to read cover to cover. Now I have the opportunity to read it on my Kindle with auto delivery and auto billing! It's perfect for me! Plus, no paper waste! (Though I do miss making Christmas trees like I did as a kid.) *Susan L. Kelley*, Kansas City, Missouri

Courts vs. Biology

Regardless of what the mother wants, the fact is that Hendrix *is* the biological father, not simply a sperm donor ("You Be the Judge"). The mother may dispute the agreement to share custody that he claims, but as surely as she is the biological mother, he is the father. If after all these court rulings the mother dies, what happens to these children as minors? Does Hendrix then miraculously become a father? The mother and the courts are being very shortsighted.

Kathryn Bothuel, Detroit, Michigan

Merry Pranksters?

I had so much fun reading about the different pranks people can pull off and find the history of pranking very interesting ("Meet the Madmen of Pranks Inc."). But I think you missed a big one: On June 18, 2003, two Miami radio hosts fooled Cuban President Fidel Castro into thinking that President Hugo Chavez was calling. (For a translated transcript, go online at cubaverdad.net/castro_radio_hoax.htm.) *M. A.*, Tamarac, Florida

Your article celebrating the cruel practical jokes of the four maturity-challenged "pranksters" was in poor taste. Torturing telemarketers for "revenge and fun" is not very funny when the telemarketer is a disabled mother trying to make a living at a job she hates but the only one she can get. Tricking someone into believing he won the lottery, embarrassing a couple with a fake marriage proposal: What's so funny? Those "pranks" cause people humiliation and embarrassment in a world greatly in need of kindness.

Lauretta Doherty, New Rochelle, New York

Help Mate

For a healthy husband, an involuntary disappearance of interest in sex seems less likely than another woman or a porn habit (Ask Laskas). It's not uncommon for even casual porn users to develop difficulty in being turned on by their actual sexual partners. Perhaps pornography and adultery should be ruled out before they seek counseling or resort to a platonic relationship.

Eric Eskildsen, Edmore, Michigan

Sometimes the physical problems affecting sex drive can go undetected. I tried all kinds of tests before I finally discovered I had a very low testosterone level. Now I receive pellet injections every four to six months. Women should know that this can happen to men. Men are often not aware of it either and blame it on other things.

R. C., via Internet


I wanted to stop my bone loss.
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IMPORTANT FACTS ABOUT BONIVA

(bon-EE-va) ibandronate sodium 150-mg tablet

What is BONIVA?

BONIVA, a bisphosphonate, is a prescription medicine used to treat and prevent osteoporosis in postmenopausal women, characterized by weakening of the bone.

Taken once a month in tablet form, BONIVA may stop and reverse bone loss in most women. It has been clinically proven to help build and maintain bone density, which can help reduce fractures.

What is the most important information about BONIVA?

BONIVA may cause serious problems in the stomach and the esophagus (the tube that connects your mouth and stomach) such as trouble swallowing, heartburn, and ulcers.

Who should not take BONIVA?

Do not take BONIVA if you:

- have abnormalities with your esophagus, such as restriction or difficulty swallowing
- have low blood calcium (hypocalcemia)
- cannot sit or stand for at least 60 minutes
- have kidneys that work very poorly
- are allergic to BONIVA or any of its ingredients

See Patient Information for complete list.

Before you start BONIVA.

Tell your health care provider if you:

- are pregnant or plan to become pregnant
- are breast-feeding
- have trouble swallowing or other problems with your esophagus
- have kidney problems
- are planning a dental procedure such as tooth extraction

Tell your health care provider and dentist about all medications you're taking, including vitamins, antacids, and supplements.

How should you take BONIVA?

You must take BONIVA exactly as instructed by your health care provider.

- Take first thing in the morning, on the same day each month.
- Swallow whole (do not chew or suck) with a full glass (6 to 8 oz) of plain water (not sparkling or mineral). Do not take with tea, coffee, juice, or milk.
- After you take BONIVA, remain standing or sitting for at least 60 minutes before you eat, drink, lie down, or take any other oral medications, including calcium, vitamins, and antacids. Some medicines can stop BONIVA from getting to your bones.
- If you take too much BONIVA, drink a full glass of milk and call your local poison control center or emergency room right away. Do not make yourself vomit. Do not lie down.

How should you take BONIVA? (continued)

- If you miss a monthly dose and your next scheduled BONIVA day is more than 7 days away, take one BONIVA 150 mg tablet in the morning following the day that you remember. Do not take two 150 mg tablets within the same week. If your scheduled BONIVA day is only 1 to 7 days away, wait until your next scheduled BONIVA day to take your tablet. Then return to taking one BONIVA 150 mg tablet every month in the morning of your chosen day, according to your original schedule. If you are not sure what to do if you miss a dose, contact your health care provider, who will be able to advise you.

What are the possible side effects of BONIVA?

Stop taking BONIVA and call your health care provider right away if you have pain or trouble swallowing, chest pain, or very bad heartburn or heartburn that does not get better. Follow dosing instructions carefully to decrease the risk of these effects.

BONIVA may cause:

- Pain or trouble swallowing
- Heartburn
- Ulcers in stomach or esophagus

Common side effects are:

- Diarrhea
- Pain in extremities (arms or legs)
- Upset stomach

Less common side effects are:

- Short-term, mild flu-like symptoms, which usually improve after the first dose

Rarely, patients have reported allergic and skin reactions. Contact your health care provider if you develop any symptoms of an allergic reaction including skin rash (with or without blisters), hives, wheezing, or swelling of the face, lips, tongue, or throat. Get medical help right away if you have trouble breathing, swallowing, or feel light-headed.

Rarely, patients have reported severe bone, joint, and/or muscle pain starting within one day to several months after beginning to take oral bisphosphonate drugs. Contact your health care provider if you develop these symptoms after starting BONIVA.

Rarely, patients have reported serious jaw problems associated with delayed healing and infection, often following dental procedures such as tooth extraction. If you experience jaw problems, contact your health care provider and dentist.

This summary is not a complete list of side effects. For a complete list, consult your health care provider or pharmacist.

Want to know more?

This summary is not everything you need to know about BONIVA. It does not take the place of talking with your health care provider about your condition or treatment. For more complete information, talk to your health care provider or pharmacist.

Visit myboniva.com or call 1-888-MyBONIVA for the complete Prescribing Information, which includes the Patient Information.

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He's tired of watching dogs being drawn into the crazy complications of everyday human life. Enough of decorator collars, doggie day care, playdates and food that's better suited to a science lab than a dog dish. Al thinks it's time to get back to the business of dogs being dogs.

REAL DOGS EAT MEAT.™





The Digest

the who • the how • the now

You half expect John Wayne or Wile E. Coyote or even Georgia O'Keeffe to peer around the corner in *Carved by Time: Landscapes of the Southwest* (The Monacelli Press, $75), a collection of 200 photographs by Jake Rajs. Sculpted by wind and water, Antelope Canyon, a Navajo Tribal Park in Arizona, is just one stop on this armchair vacation.

The Best Year Ever

A former workaholic discovers the joy of putting people first



Fired from his longtime job at 54, Lee Kravitz created a refreshingly different kind of bucket list. How Kravitz made the list and achieved its goals is chronicled in his book *Unfinished Business: One Man's Extraordinary Year of Trying to Do the Right Things* (Bloomsbury, $25). "After I lost my job [as the editor of *Parade* magazine], I was going through boxes of memen-

tos, and that sparked memories of things I should have done but didn't," he says. "I realized I had become disconnected from important people and values."

For the next year, with his wife's blessing, Kravitz traveled the country making amends. Among his ten missions: Pay a thank-you visit to the teacher who'd mentored him in high school; reach out to a lonely, mentally ill aunt

> "Working and raising a family, you have only so much time and energy. **It's easy to tell yourself, I'll get back to people later."**

with whom his whole family had lost touch; and repay a $600 debt to a pal he hadn't seen in decades.

"Once you start working and raising a family, you have only so much time and energy," he says. "It's easy to tell yourself, I'll get back to people later. At 54, I realized, Hey, that went by pretty quickly."

One childhood friend had become a monk; Kravitz hadn't spoken to him since 1971. "I was afraid I was going to intrude on his life," says Kravitz, who flew out to the monastery. "But after our visit, he told me that seeing me helped him put his earlier life in perspective and reaffirm his choice, just like spending time with him had clarified my deep commitment to being a father and a husband and a regular citizen in the world.

"Every experience was just so much richer than I could have imagined," Kravitz says. "I rediscovered the parts of myself that were compassionate, sensitive, and adventurous. And every encounter sparked a similar experience in the people I spent time with." The friend who'd lent him $600 had completely forgotten that debt ("which in my mind had grown to $6 million," Kravitz quips), but their meeting brought back memories of an intrepid youth, spurring Kravitz afterward to climb a mountain with his wife and kids. The high school teacher was not only gratified by his former student's three-day visit but also asked questions that were as challenging and inspiring as ever. Kravitz's aunt, a promising pianist who hadn't had a visit from her family in 14 years, flourished and began playing piano again; most important, she knows that someone cares.

Now Kravitz needs to find a new job, but he has vowed to continue taking care of unfinished business. "I had a tremendous opportunity to go on journeys and reflect and write a book," he says. But even without the luxury of all that time, "it's amazing what you can accomplish with just a call or an e-mail when you make a conscious effort to reach out."

Dawn Raffel

PHOTOGRAPHED BY ANDREW BRUSSO

hello



Eyeglasses you can afford. Netflix meets optometry, says *GQ*. Go to warbyparker .com and choose up to five frames (there are no German Expressionist or windshield-size choices). After they arrive by mail (no charge), try them on, pick a pair, and return them (no charge) with your prescription; you'll receive a finished pair for $95. (The company donates a pair for every pair it sells.)

A noisy graduation present most kids would love (and some parents will not). With OrigAudio's Rock-It ($49.99, origaudio.com), anything can be a speaker—an empty milk jug, a cardboard box, a kitchen cabinet. It attaches to any music player that has a headphone jack and lets everyone feel the vibrations, whether they're by Ke$ha or the King's College Choir.



Instant envelopes. Create an envelope lined with a Google map of any location you choose. Go to mapenvelope.com, pick a location and message, print it, fold along dotted lines, stamp, and mail.

goodbye

Shoelessness in airports. Several companies are racing to develop airport shoe scanners. An earlier generation of the devices failed to meet Transportation Security Administration standards, but the TSA says it could buy up to 100 improved machines by next year, according to *USA Today*.

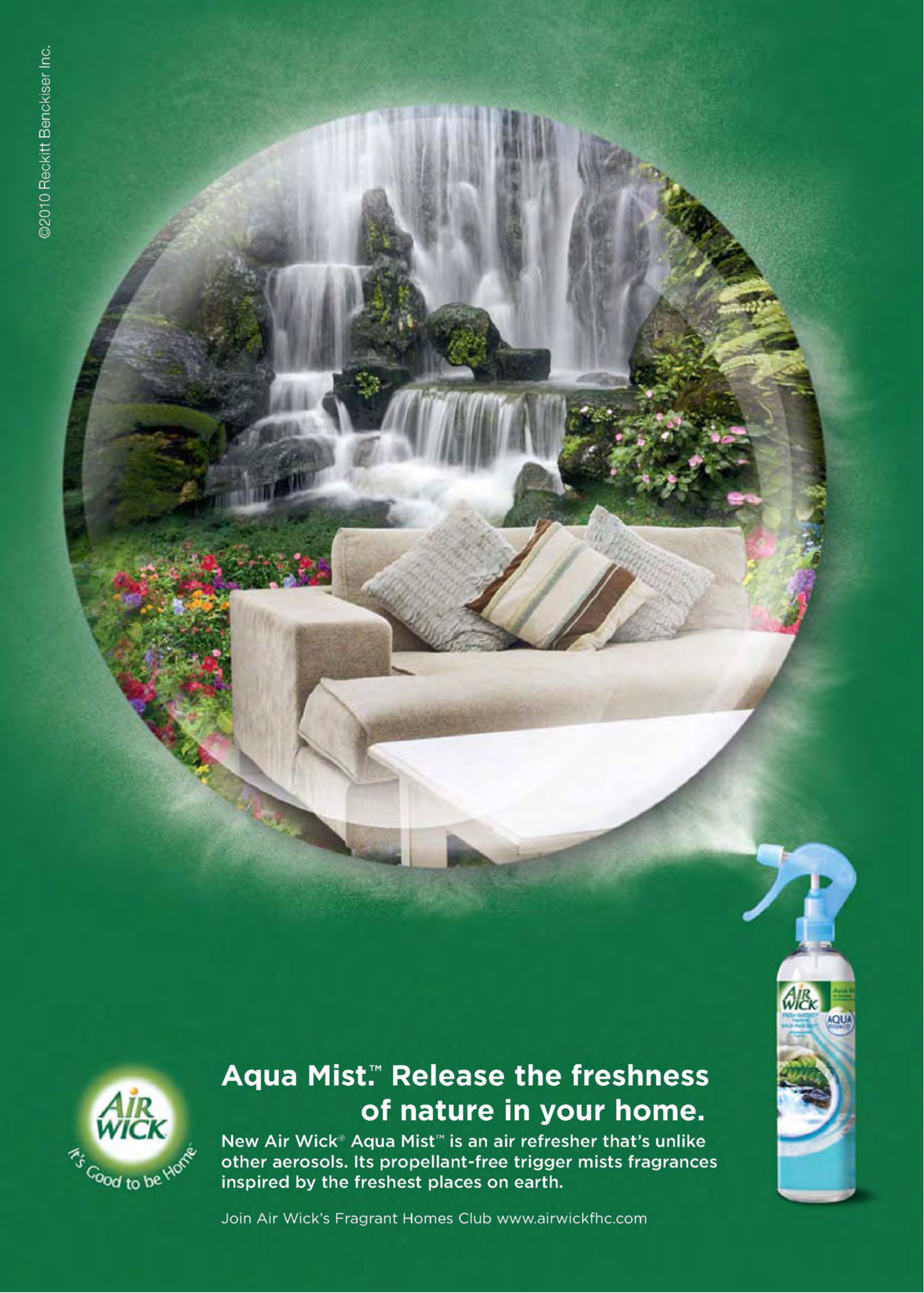


Affordable garlic. Prices in the U.S. for Chinese-grown garlic are up as much as 130 percent, following Asian demand for its purported medicinal properties during swine-flu season. As *Fortune* reports, "It's good news for growers, but not so much for eaters."

Yearbooks and class photos. Purdue and Mississippi State have stopped publishing yearbooks, and now the University of Virginia has joined the list. The *Washington Post* blames stretched budgets and lack of interest. What's more, revenue for class portraits of kindergartners through 11th graders is down 18 percent, says the *New York Times*.

• word of the month

singletasker = someone who does one thing at a time until it's finished; the opposite of a multitasker. Source: urbandictionary.com


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The 1-800 reservations number will probably send you to a central office with set rates. If you **call the hotel directly** instead, you can negotiate.

Hotels can pay a commission of up to 30 percent to online booking sites. So **offer me 20 percent less** than the online price, and we both come out ahead.

Independently owned hotels are far more likely to give you a discount. Some chains balk at dropping the rate.

If you show up at 11 a.m. and check-in time is 2 p.m., please **don't be upset if your room isn't ready.** I can't make the housekeepers go any faster. And you don't want them to rush.

Don't ask me for an upgrade when other guests are within earshot. Want a more spacious room without paying more? **Request a corner room** or a handicapped one.

Some concierges get kickbacks for sending you to pricey tourist traps. **If you want an unbiased recommendation, ask me.**

Sometimes my boss makes me lie, like when the elevator's not working and I tell you someone is coming to fix it soon. I know it won't be fixed until Monday, because the manager doesn't want to pay the repairman's weekend rate.

Don't call between 9 a.m. and 1 p.m. with a special request. Chances are I'll have **a long line of guests waiting to check out or in** and will just want to get you off the phone.

My official job description: errand runner, toilet plunger, bow-tie tier, towel deliverer, and chef (that free continental breakfast doesn't appear from above). I've also sprinkled rooms with rose petals and **dealt with dead bodies.** All for about $10 an hour.

We love it when you steal the soap, shampoo, and lotion. That's why we put our logo on them. **But pillows, bedspreads, and irons?** We're billing your credit card.

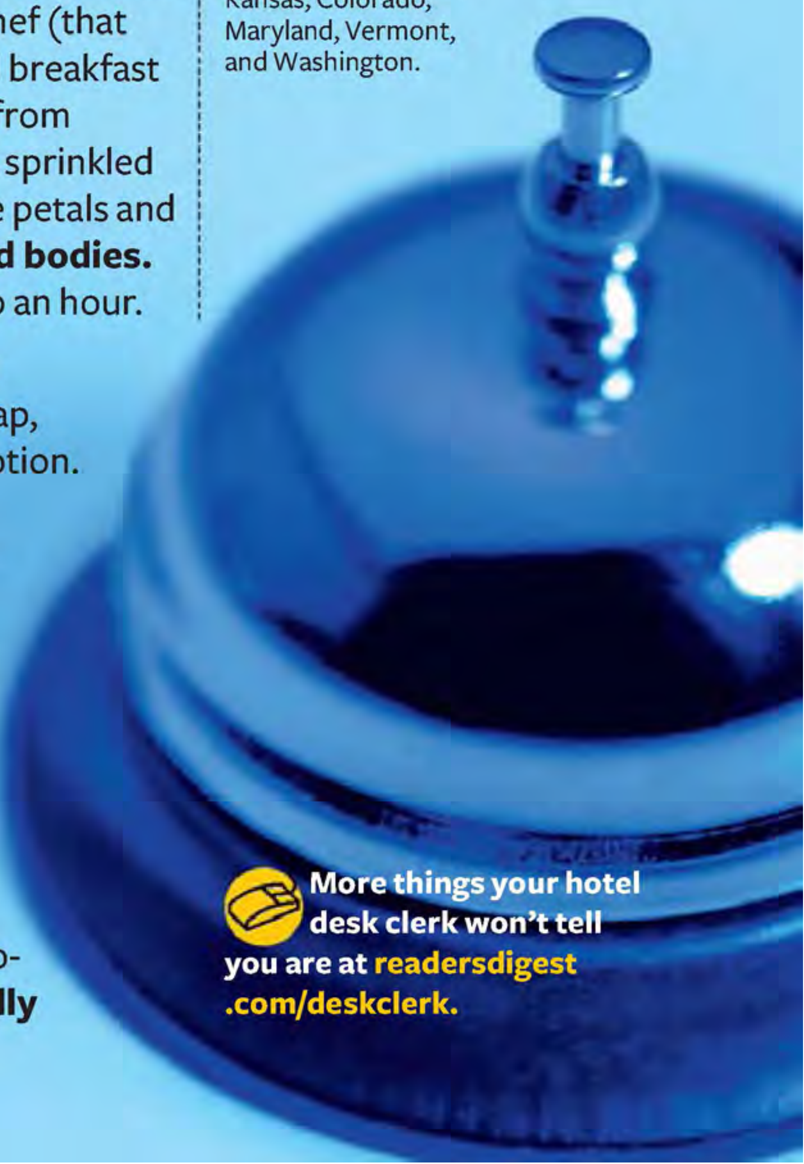
Keep it down. Even the best hotels **aren't totally soundproof**, and I'm the one who has to send the security guard up to knock on your door when someone complains.

It's a lot easier for me to remove Wi-Fi charges from your bill at checkout than to agree to waive them in advance.

No, we **don't have an hourly rate.** You don't want to be at a hotel like that anyway.

Interviews by *Michelle Crouch*

Sources: current and former desk clerks at hotels in Mississippi, Kansas, Colorado, Maryland, Vermont, and Washington.



More things your hotel desk clerk won't tell you are at readersdigest .com/deskclerk.

If you can draw a map to every bathroom in town...



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is the day to talk to your doctor about overactive bladder and TOVIAZ® – a pill that comes with a plan.

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- and a plan that offers you practical tips, tools and resources to help you take an active role in your treatment.

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*Results may vary.

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- **food & drink** make more informed choices
- **teach your bladder** train your bladder to "wait"
- **daily Toviaz®** always take as directed
- **keep track** share with your doctor

Toviaz® treats the symptoms of overactive bladder (leaks, strong, sudden urges to go, going too often).

Important Safety Information

If you have certain stomach problems, glaucoma, or cannot empty your bladder, you should not take Toviaz. Medicines like Toviaz can cause blurred vision, drowsiness, and decreased sweating. Use caution when driving, doing unsafe tasks, or in especially hot environments, until you know how Toviaz affects you. Drinking alcohol while taking medicines such as Toviaz may cause increased drowsiness. The most common side effects are dry mouth and constipation. Toviaz has benefits and risks. There may be other options.

You're encouraged to report negative side effects of prescription drugs to the FDA.

Visit www.FDA.gov/medwatch or call 1-800-FDA-1088.

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IMPORTANT FACTS

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(TOH-vee-as)

ABOUT OVERACTIVE BLADDER

Overactive bladder happens when the bladder muscle squeezes too often or when you don't want it to. You may have wetting accidents (urge urinary incontinence). You may have a strong need to urinate right away (urgency). You may also have to go too often (frequency).

WHO IS TOVIAZ FOR?

Who can take TOVIAZ?

Adults 18 years and older with symptoms of overactive bladder. TOVIAZ has not been studied in children.

Who should not take TOVIAZ?

Do not take TOVIAZ if you:

- Are not able to empty your bladder (urinary retention).
- Your stomach empties slowly (gastric retention).
- Have an eye problem called "uncontrolled narrow-angle glaucoma."
- Are allergic to TOVIAZ or any of its ingredients.

BEFORE YOU START TOVIAZ

Tell your doctor about all your medical conditions, including:

- Stomach or intestinal problems or problems with constipation.
- Problems emptying your bladder or if you have a weak urine stream.
- Treatment for an eye problem called narrow-angle glaucoma.
- Kidney problems.
- Liver problems.
- A condition called myasthenia gravis.
- If you are pregnant or trying to become pregnant. It is not known if TOVIAZ can harm your unborn baby.
- If you are breastfeeding. It is not known if TOVIAZ passes into your breast milk or if it can harm your baby.

Before starting on TOVIAZ, tell your doctor about all the medicines you take, including prescription and nonprescription medicines, vitamins and herbal products. TOVIAZ may affect the way other medicines work, and other medicines may affect how TOVIAZ works. Especially tell your doctor if you are taking antibiotics or antifungal medicines.

POSSIBLE SIDE EFFECTS OF TOVIAZ

The most common side effects are:

- Dry mouth
- Constipation

TOVIAZ may cause other less common side effects, including:

- Dry eyes
- Trouble emptying the bladder

These are not all of the possible side effects of TOVIAZ. For a complete list, ask your doctor or pharmacist.

HOW TO TAKE TOVIAZ

- Take TOVIAZ exactly as your doctor tells you.
- Your doctor may give you the lower 4 mg dose of TOVIAZ if you have certain medical conditions, such as severe kidney problems.
- Take TOVIAZ with liquid and swallow the tablet whole. Do not chew, divide or crush the tablet.
- You can take TOVIAZ with or without food.
- If you miss a dose of TOVIAZ, begin taking TOVIAZ again the next day. Do not take two doses of TOVIAZ in the same day.

Things you should keep in mind when taking TOVIAZ:

- Use caution in driving, operating machinery, or doing other dangerous activities until you know how TOVIAZ affects you. Blurred vision and drowsiness are possible side effects of medicines such as TOVIAZ.
- Use caution in hot environments. Decreased sweating and severe heat illness can occur when medicines such as TOVIAZ are used in a hot environment.
- Drinking alcohol while taking medicines such as TOVIAZ may cause increased drowsiness.

What is TOVIAZ?

TOVIAZ is a prescription medicine used in **adults** to treat symptoms of a condition called **overactive bladder**, including:

- Urge urinary incontinence—leaking or wetting accidents due to a strong need to urinate.
- Urinary urgency—having a strong need to urinate right away.
- Urinary frequency—having to urinate too often.

NEED MORE INFORMATION?

- This is only a summary of important information. Ask your doctor or pharmacist for complete product information.
- Go to www.Toviaz.com.
- Call **1-877-9-TOVIAZ**.

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Matthew **Morrison**

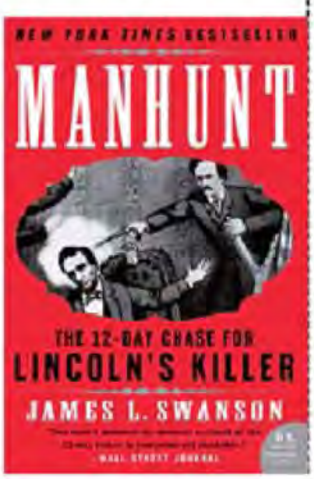
On Fox's fresh hit *Glee*, he plays high school teacher Will Schuester, director of a misfit team of singers.



WHAT HE'S PLUGGING His show: "The second half of the first season is a wild ride." His album: "It's me with a big orchestra sound behind me, singing some covers but mostly original songs. Hopefully it will be out around December."



WHAT HE'S READING "*Manhunt,* about John Wilkes Booth after he killed Lincoln—the 12-day manhunt to find him and bring him down. I did a production of *Assassins*, the Sondheim musical, and I played Booth, so I've always been kind of fascinated by him."



WHERE HE'S SURFING "I go on espn.com, or on politico.com if I want to get my politics kick. But I pretty much just use the Internet for e-mail and Facebook."



WHAT HE'S WATCHING "I don't have a TV at the moment. But when I am around one, I'm usually watching ESPN. I'm really into sports. I was a big soccer player growing up. I'm a New York Mets fan. I love watching baseball. I like watching the Lakers. I actually went up to Vancouver for a weekend to watch the Olympics."

WHAT HE'S LISTENING TO "I listen to Sirius Satellite Radio's Coffee House channel, which features acoustic versions of great songs—Sting will come on and do 'Roxanne' with just a guitar. Or if I'm missing New York City," where Morrison starred in the musicals *Hairspray* and *The Light in the Piazza,* "I'll turn on Howard Stern to get that gritty New York attitude."



His Reader's Digest Version of
LIFE AND WORK
"Laughter is the key to life. I'm so happy to be part of a show that brings that to people—that gleefulness and joy. Even in times of hardship, laughter is the best medicine for pretty much everything."

Interview by *Susan Murcko*

ILLUSTRATED BY ZACH TRENHOLM; (GLEE) MICHAEL YARISH/© FOX TELEVISION/EVERETT COLLECTION; (STING) MARCOS BORGA/REUTERS/CORBIS


COOK, CLEAN, PAY BILLS
CHAT, GOSSIP, LAUGH
We custom roast each bean, bringing out its fullest flavor.
Giving you one great cup of coffee — and a more flavorful day.
BE GOOD TO THE LAST DROP
ORIGINAL ROAST
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medium
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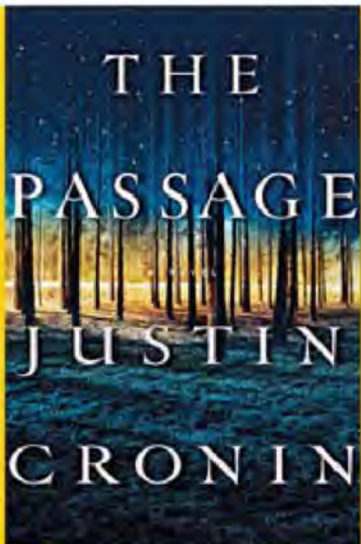
The Digest mini book excerpts

• nonfiction



[They] got mortared almost immediately. The enemy knew a new unit was coming into the valley, and it was their way of saying hello ... The men took cover in the mechanics' bay and then shouldered their gear and climbed the hill up to their tents at the top of the base. The climb was only a hundred yards, but it smoked almost everyone. Around them, the mountains flew up in every direction. The men knew that before the year was out, they would probably have to walk on everything they could see.

WAR BY SEBASTIAN JUNGER (TWELVE, $26.99)

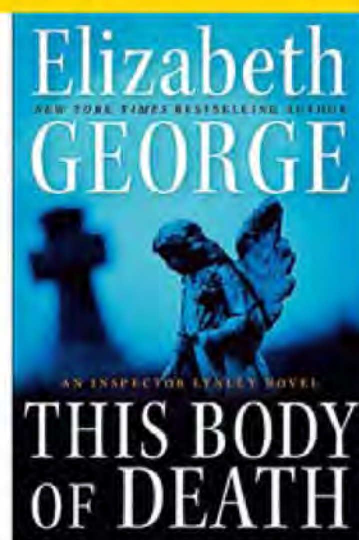


• vampire thriller

Lacey saw the first one come out an open window. So quick! Like light itself! How a man would move if he were made of light! It was up and over in an instant, vaulting off the roof into space, sailing through the air above the compound, alighting in a stand of trees a hundred yards away. A man-sized flash of throbbing luminescence, like a shooting star ... The treetops where he landed absorbed his weight with a shudder. Lacey saw what was about to happen.

THE PASSAGE BY JUSTIN CRONIN (BALLANTINE BOOKS, $27)

• british mystery



She and Jemima Hastings had been thick as thieves from the time they were six years old, and they'd celebrated their birthdays together from their eighth one on. Meredith knew that if she didn't make things right with Jemima today, she probably wouldn't ever do it, and if that happened, a tradition she'd long held dear was going to be destroyed. She didn't want that.

THIS BODY OF DEATH: AN INSPECTOR LYNLEY NOVEL BY ELIZABETH GEORGE (HARPER, $28.99)



• american mystery

When David Pepin first dreamed of killing his wife, he didn't kill her himself. He dreamed convenient acts of God. At a picnic on the beach, a storm front moved in. David and Alice collected their chairs, blankets, and booze, and when the lightning flashed, David imagined his wife lit up, her skeleton distinctly visible as in a children's cartoon, Alice then collapsing into a smoking pile of ash ... "Some storm," she said.

MR. PEANUT BY ADAM ROSS (ALFRED A. KNOPF, $25.95, AVAILABLE JUNE 25)



• swedish mystery

Ekström straightened his glasses and stroked his well-groomed goatee. He felt that the situation was chaotic and ominous. For several weeks they had been hunting Lisbeth Salander. He himself had proclaimed her far and wide to be mentally imbalanced, a dangerous psychopath. He had leaked information that would have backed him up in an upcoming trial. Everything had looked so good. There had been no doubt in his mind that Salander was guilty of three murders. The trial should have been a straightforward matter, a pure media circus with himself at center stage. Then everything had gone haywire, and he found himself with a completely different murderer and a chaos that seemed to have no end in sight.

THE GIRL WHO KICKED THE HORNET'S NEST BY STIEG LARSSON (ALFRED A. KNOPF, $27.95)

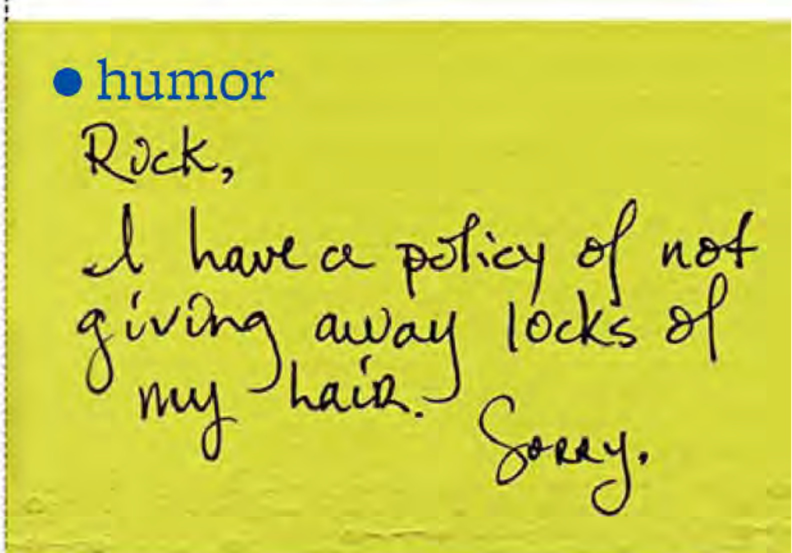
• family drama

You'd be hard-pressed to find anyone in Verona who could field dress a moose. Hybrid cars proliferated in public parking lots, plastic bags were on the verge of being outlawed by the city council, and smoking had recently been banned inside the city limits. Yet when it came to the subject of raising young adults, it was easy to find levels of discord and vitriol unrivaled even in the last presidential election.



BEACH WEEK BY SUSAN COLL (SARAH CRICHTON BOOKS/FSG, $25)

• humor



OTHER PEOPLE'S REJECTION LETTERS: RELATIONSHIP ENDERS, CAREER KILLERS, AND 150 OTHER LETTERS YOU'LL BE GLAD YOU DIDN'T RECEIVE EDITED BY BILL SHAPIRO (CLARKSON POTTER, $22.50)



Depression can make you feel like you have to wind yourself up to get through the day.

PRISTIQ. Proven to treat depression.

Depression is a serious medical condition that can take so much out of you. You may experience frequent sadness, a loss of interest, lack of energy, and trouble concentrating.

PRISTIQ is thought to work by affecting the levels of two chemicals in the brain, serotonin and norepinephrine.

PRISTIQ may be a key in helping to treat your depression. So ask your doctor about PRISTIQ.

Pristiq®
desvenlafaxine
EXTENDED-RELEASE TABLETS

May 2009

254110-01

Important Safety Information

PRISTIQ® (desvenlafaxine) is a prescription medication approved for the treatment of major depressive disorder in adults.

Suicidality and Antidepressant Drugs
Antidepressants increased the risk compared to placebo of suicidal thinking and behavior (suicidality) in children, teens, and young adults. Depression and certain other psychiatric disorders are themselves associated with increases in the risk of suicide. Patients of all ages who are started on antidepressant therapy should be monitored appropriately and observed closely for clinical worsening, suicidality, or unusual changes in behavior. PRISTIQ is not approved for use in children under 18.

- People taking MAOIs should not take PRISTIQ.
- All patients taking antidepressants should be observed closely for signs that their condition is getting worse or that they are becoming suicidal. This is very important when an antidepressant is started or when the dose is changed. Patients should be watched for becoming agitated, irritable, hostile, aggressive, impulsive, or restless. These symptoms should be reported to the patient's healthcare professional right away.
- Tell your healthcare professional about all prescription and over-the-counter medications you are taking or plan to take, including:
  - Medicines to treat migraines or mood disorders, to avoid a potentially life-threatening condition
  - Aspirin, NSAID pain relievers, or blood thinners because they may increase the risk of bleeding
- PRISTIQ may cause or make some conditions worse, so tell your healthcare professional about all your medical conditions, including if you:
  - Have high blood pressure. Your blood pressure should be controlled before you start taking PRISTIQ and monitored regularly
  - Have heart problems, high cholesterol or triglyceride levels, or a history of stroke
  - Have glaucoma or increased eye pressure
  - Have kidney or liver problems
  - Have or had mania, bipolar disorder, seizures, or convulsions
  - Have low sodium levels in your blood
  - Are nursing, pregnant, or plan to become pregnant
- Discontinuation symptoms may occur when stopping PRISTIQ, especially when therapy is stopped suddenly. Talk to your healthcare professional before you stop taking or reduce the dose of PRISTIQ.
- Until you see how PRISTIQ affects you, be careful driving a car or operating machinery. Avoid drinking alcohol while taking PRISTIQ.
- Side effects when taking PRISTIQ 50 mg may include nausea, dizziness, sweating, constipation, and decreased appetite.

Please see Brief Summary of Prescribing Information on next page.

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch, or call 1-800-FDA-1088.

Visit Pristiq.com or call 1-800-PRISTIQ

If you do not have prescription drug insurance and need help paying for PRISTIQ, Wyeth may be able to help. Visit us at www.wyeth.com or call us at 1-800-568-9938 for more information.

Pristiq®
desvenlafaxine
EXTENDED-RELEASE TABLETS

Wyeth®

IMPORTANT FACTS ABOUT Pristiq® desvenlafaxine EXTENDED-RELEASE TABLETS

(pris•teek')
Pristiq® - (desvenlafaxine) Extended-Release Tablets

Read the Medication Guide that comes with your or your family member's antidepressant medicine. Talk to your, or your family member's, healthcare provider about:

- all risks and benefits of treatment with antidepressant medicines
- all treatment choices for depression or other serious mental illness

What is the most important information I should know about antidepressant medicines, depression and other serious mental illnesses, and suicidal thoughts or actions?

1. Antidepressant medicines may increase suicidal thoughts or actions in some children, teenagers, and young adults within the first few months of treatment.

2. Depression and other serious mental illnesses are the most important causes of suicidal thoughts and actions. Some people may have a particularly high risk of having suicidal thoughts or actions. These include people who have (or have a family history of) bipolar illness (also called manic-depressive illness) or suicidal thoughts or actions.

3. How can I watch for and try to prevent suicidal thoughts and actions in myself or a family member?

- Pay close attention to any changes, especially sudden changes, in mood, behaviors, thoughts, or feelings. This is very important when an antidepressant medicine is started or when the dose is changed.
- Call the healthcare provider right away to report new or sudden changes in mood, behavior, thoughts, or feelings.
- Keep all follow-up visits with the healthcare provider as scheduled. Call the healthcare provider between visits as needed, especially if you have concerns about symptoms.

Call a healthcare provider right away if you or your family member has any of the following symptoms, especially if they are new, worse, or worry you:

- thoughts about suicide or dying
- attempts to commit suicide
- new or worse depression
- new or worse anxiety
- feeling very agitated or restless
- panic attacks
- trouble sleeping (insomnia)
- new or worse irritability
- acting aggressive, being angry or violent
- acting on dangerous impulses
- an extreme increase in activity and talking (mania)
- other unusual changes in behavior or mood

What else do I need to know about antidepressant medicines?

- **Never stop an antidepressant medicine without first talking to a healthcare provider.** Stopping an antidepressant medicine suddenly can cause other symptoms.
- **Antidepressants are medicines used to treat depression and other illnesses.** It is important to discuss all the risks of treating depression and also the risks of not treating it. Patients and their families or other caregivers should discuss all treatment choices with the healthcare provider, not just the use of antidepressants.
- **Antidepressant medicines have other side effects.** Talk to the healthcare provider about the side effects of the medicine prescribed for you or your family member.
- **Antidepressant medicines can interact with other medicines.** Know all of the medicines that you or your family member takes. Keep a list of all medicines to show the healthcare provider. Do not start new medicines without first checking with your healthcare provider.
- **Not all antidepressant medicines prescribed for children are FDA approved for use in children.** Talk to your child's healthcare provider for more information.

This Medication Guide has been approved by the U.S. Food and Drug Administration for all antidepressants.

Important Information about Pristiq

Read the patient information that comes with Pristiq before you take Pristiq and each time you refill your prescription. There may be new information. If you have questions, ask your healthcare provider. This information does not take the place of talking with your healthcare provider about your medical condition or treatment.

What is Pristiq?

- Pristiq is a prescription medicine used to treat depression. Pristiq belongs to a class of drugs known as SNRIs (or serotonin-norepinephrine reuptake inhibitors).
- Pristiq is not approved for use in children and adolescents.

Who should not take Pristiq?

Do not take Pristiq if you:

- are allergic to desvenlafaxine, venlafaxine or any of the ingredients in Pristiq.
- currently take, or have taken within the last 14 days, any medicine known as an MAOI. Taking an MAOI with certain other medicines, including Pristiq, can cause serious or even life-threatening side effects. Also, you must wait at least 7 days after you stop taking Pristiq before you take any MAOI.

What should I tell my healthcare provider before taking Pristiq?

Tell your healthcare provider about all your medical conditions, including if you:

- have high blood pressure
- have heart problems
- have high cholesterol or high triglycerides
- have a history of stroke
- have glaucoma
- have kidney problems
- have liver problems
- have or had bleeding problems
- have or had seizures or convulsions
- have mania or bipolar disorder
- have low sodium levels in your blood
- are pregnant or plan to become pregnant. It is not known if Pristiq will harm your unborn baby.
- are breastfeeding. Pristiq can pass into your breast milk and may harm your baby. Talk with your healthcare provider about the best way to feed your baby if you take Pristiq.

• Serotonin syndrome or neuroleptic malignant syndrome (NMS)-like reactions

Rare but potentially life-threatening, conditions called serotonin syndrome or Neuroleptic Malignant Syndrome (NMS)-like reactions can happen when medicines such as Pristiq are taken with certain other medicines. Serotonin syndrome or NMS-like reactions can cause serious changes in how your brain, muscles and digestive system work.

Especially tell your healthcare provider if you take the following:

- medicines to treat migraine headaches known as triptans
- St. John's Wort
- MAOIs (including linezolid, an antibiotic)
- tryptophan supplements
- silbutramine
- tramadol
- medicines used to treat mood disorders, including tricyclics, lithium, selective serotonin reuptake inhibitors (SSRIs), or serotonin norepinephrine reuptake inhibitors (SNRIs)

Ask your healthcare provider if you are not sure whether you are taking any of these medicines.

Before you take Pristiq with any of these medicines, talk to your healthcare provider about serotonin syndrome. See "What are the possible side effects of Pristiq?"

Pristiq contains the medicine desvenlafaxine. Do not take Pristiq with other medicines containing venlafaxine or desvenlafaxine.

What should I avoid while taking Pristiq?

- Do not drive a car or operate machinery until you know how Pristiq affects you.
- Avoid drinking alcohol while taking Pristiq.

What are the possible side effects of Pristiq?

Pristiq can cause serious side effects, including:

- **See the beginning of this page.**

• Serotonin syndrome or neuroleptic malignant syndrome (NMS)-like reactions. See "What should I tell my healthcare provider before taking Pristiq?"

Get medical help right away if you think that you have these syndromes. Signs and symptoms of these syndromes may include one or more of the following:

- restlessness
- hallucinations (seeing and hearing things that are not real)
- coma
- nausea
- vomiting
- confusion
- increase in blood pressure
- diarrhea
- loss of coordination
- fast heart beat
- increased body temperature
- muscle stiffness

Pristiq may also cause other serious side effects including:

• New or worsened high blood pressure (hypertension). Your healthcare provider should monitor your blood pressure before and while you are taking Pristiq. If you have high blood pressure, it should be controlled before you start taking Pristiq.

• Abnormal bleeding or bruising. Pristiq and other SNRIs/SSRIs may cause you to have an increased chance of bleeding. Taking aspirin, NSAIDs (non-steroidal anti-inflammatory drugs), or blood thinners may add to this risk. Tell your healthcare provider right away about any unusual bleeding or bruising.

• Glaucoma (increased eye pressure)

• Increased cholesterol and triglyceride levels in your blood

• Symptoms when stopping Pristiq (discontinuation symptoms). Side effects may occur when stopping Pristiq (discontinuation symptoms), especially when therapy is stopped suddenly. Your healthcare provider may want to decrease your dose slowly to help avoid side effects.

Some of these side effects may include:

- dizziness
- nausea
- anxiety
- irritability
- sleeping problems (insomnia)
- sweating
- abnormal dreams
- tiredness
- diarrhea
- headache

• Seizures (convulsions)

• Low sodium levels in your blood. Symptoms of this may include headache, difficulty concentrating, memory changes, confusion, weakness, and unsteadiness on your feet. In severe or more sudden cases, symptoms can include hallucinations (seeing or hearing things that are not real), fainting, seizures and coma. If not treated, severe low sodium levels could be fatal. Contact your healthcare provider if you think you have any of these side effects.

Common side effects with Pristiq include:

- nausea
- headache
- dry mouth
- sleepiness
- dilated pupils
- insomnia
- constipation
- loss of appetite
- tremor
- diarrhea
- vomiting
- anxiety
- dizziness
- decreased sex drive
- delayed orgasm and ejaculation
- sweating
- tiredness

These are not all the possible side effects of Pristiq. Tell your healthcare provider about any side effect that bothers you or does not go away. Call your doctor for medical advice about side effects. For more information on these and other side effects associated with Pristiq, talk to your healthcare provider, visit our web site at www.pristiq.com or call our toll-free number 1-888-Pristiq.

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch, or call 1-800-FDA-1088.

Contact Information

Please visit our web site at www.pristiq.com, or call our toll-free number 1-888-Pristiq to receive more information. This product's label may have been updated. For current package insert and further product information, please visit www.wyeth.com or call our medical communications department toll-free at 1-800-934-5556.

Wyeth®

Wyeth Pharmaceuticals Inc.
Philadelphia, PA 19101
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254313-01

What would you do if you found someone's wallet?

Honesty is the best policy, the world agrees. In this month's global survey, we asked respondents in 16 countries how they'd react if they found a wallet with $1,000 inside. The No. 1 response by a wide margin in every nation was "Return the wallet and the money." As a rule, the countries with more Good Samaritans have higher per capita incomes and low rates of public corruption. In second place: leaving the wallet where it was found. (Let's just hope everyone is being honest about being honest!)

"I would not have a clear conscience if I didn't return everything.

Rosario Ramirez, 39,
Mexico City, Mexico

"Who carries that much cash in his wallet? Someone who has too much money. I would keep it.

Kerstin Luking, 36,
Dortmund, Germany

"I would return it, and I hope someone would do the same if I lost my wallet (not that there's ever any money in it).

Martha Petersen, 45,
North Attleborough, Massachusetts

For more on our Around the World survey, watch CNN International and go to readersdigest.com/worldquestions.

PHOTOGRAPHED BY NICHOLAS EVELEIGH

1st Choice
Return the wallet and the money

Australia	91%
U.S.	90
Canada	89
U.K.	89
Philippines	86
Netherlands	79
Germany	76
Italy	75
Malaysia	75
Mexico	73
Brazil	69
Spain	69
France	65
China	58
India	57
Russia	49

Who's the most honest?

Respondents over age 45 in Australia, 97 percent of whom say they'd return both the money and the wallet—the highest percentage in our survey.

2nd Choice
Leave it where you found it

India	27%
Russia	24
China	23
Brazil	15
Malaysia	12
Mexico	11



3rd Choice
Keep the money and toss the wallet

Russia	17%
France	16
China	15
Germany	13
Mexico	12

Who's more likely to keep the cash—men or women?

In 13 nations, more men admit they'd take the money. In the U.S., India, and China, more women say they'd pocket the cash.

4th Choice
Keep the money and return the wallet

Spain	14%
France	11
Italy	10
Russia	10
Netherlands	8


Advertisement
Cats, Dogs,
& Automobiles
Pets deserve a vacation too! Our helpful tips will make traveling with your furry friend stress free.
Vet Check Ask your veterinarian if your pet is fit to travel and request the proper documentation you'll need to take him along.
Road Trip Rules A crate or harness is recommended while driving, and make several pit stops to give your pet bathroom and water breaks. Never leave your pet unattended in the car.
Flying Furballs A direct, nonstop flight is easier on both animals and people, and traveling when the temperature is cool is better for your pet's health.
Pet Friendly Choose a pet-friendly hotel, and pack bedding that carries your scent to remind your pet of home.
Keep a Routine Feeding times and number of walks should stay consistent with what you do at home.
Stay Healthy Did you know 70% of your dog's immune system is in his/her digestive tract? Iams with PreBiotics works inside the digestive tract to promote healthy digestion and strong defenses.
IAMS
MiniChunks
PROACTIVE HEALTH
See the power of Iams with PreBiotics at Iams.com
Life's Better
IAMS

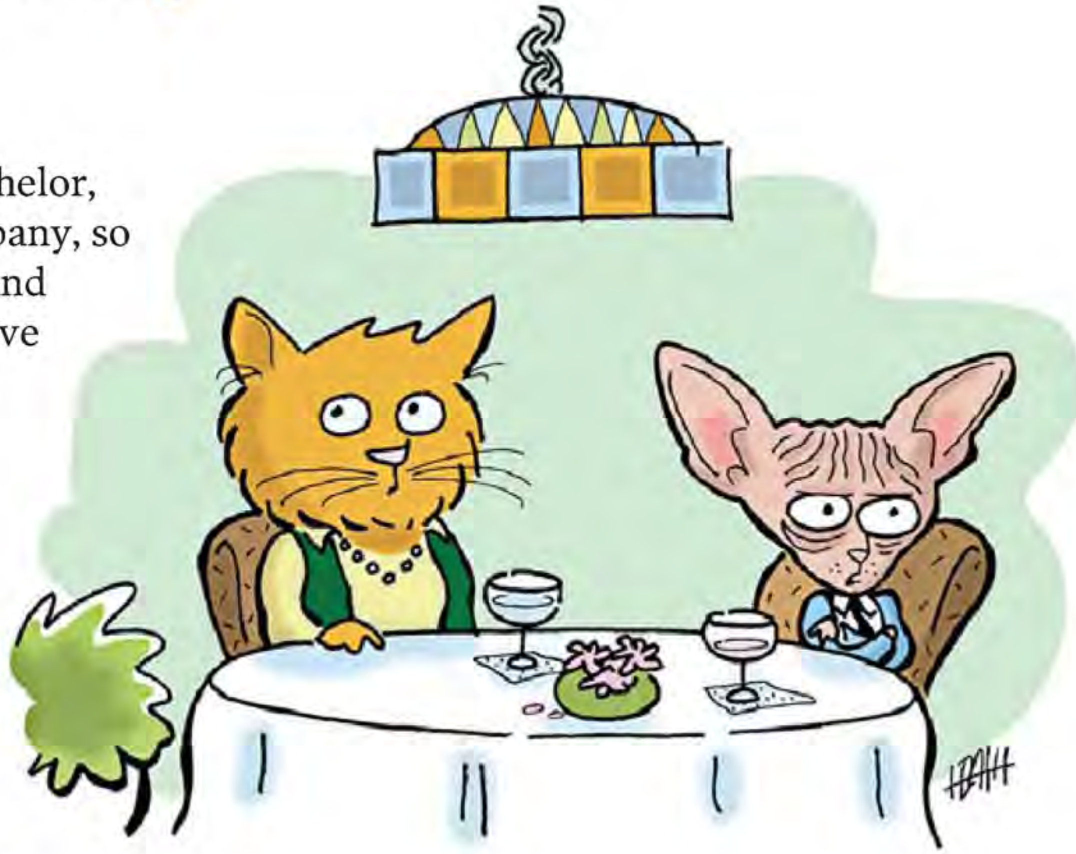

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My beauty is more
than fur deep.
I am more than just a cat.
I am an Iams cat
Iams with PreBiotics. Now in dry and wet.
Iams with PreBiotics works inside the digestive tract to promote healthy digestion and strong defenses. Healthy inside. Healthy outside. See the power of Iams with PreBiotics at Iams.com
IAMS with PreBiotics
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IAMS
Original
PROACTIVE HEALTH

Laugh! :)

Steve, a lonely bachelor, wants some company, so he buys a centipede and a small box for it to live in. That evening, he decides to go out.

"Want to grab a drink?" he asks the centipede. But there's no answer from the box. A few minutes later, he asks again—still no reply. Finally, he hollers, "Hey! Do you want to get a drink?"

"I heard you the first time!" says a small, irritated voice. "I'm putting on my shoes!"



"I'm not bald. I'm hairless. There's a difference."

As the stranger enters a country store, he spots a sign: "Danger! Beware of Dog!" Inside, he sees a harmless old hound asleep in the middle of the floor.

"Is that the dog we're supposed to beware of?" he asks the owner.

"That's him," comes the reply.

"He doesn't look dangerous to me. Why would you post that sign?"

"Before I posted that sign, people kept tripping over him."

Submitted by *L. B. Weinstein*

My mother asked me to hand out invitations for my brother's surprise birthday party. That's when I realized he was her favorite twin.

Submitted by *Terry Sangster*

The unsaid part of "This is fascinating!" is "to me." Comic *Dan Upham*

Three boys are boasting about their grandfathers. "My grandpa is a great swimmer," says the first. "He can swim for hours!"

"That's nothing," says the second. "My grandpa goes swimming at six in the morning every day and doesn't get out till six at night."

"Big deal!" smirks the third boy. "My grandpa started swimming in this pond 20 years ago, and he still hasn't come out!"

ILLUSTRATED BY MARK HEATH

M, pls rite on tabs & giv 2 ppl

If God had texted the Ten Commandments to Moses:

1. no1 b4 me. srsly.
2. dnt wrshp pix/idols
3. no omg's
4. no wrk on w/end (sat 4 now; sun l8r)
5. pos ok – ur m&d r cool
6. dnt kill ppl
7. :-X only w/ m8
8. dnt steal
9. dnt lie re: bf
10. dnt ogle ur bf's m8. or ox. or dnkey. myob.

Jamie Quatro on mcsweeneys.net

I've always been a disappointment. When I was five, I looked down at the crayons I was coloring with and sighed—when I was two, this is not what I saw myself doing at five.

Comic *Eric Lyden,* comedysmack.com

Two guys are out drinking when one of them falls off his barstool and lies motionless on the floor.

"One thing about Fred," his buddy says to the bartender. "He knows when to stop." Submitted by *Ken Zavislik*

If Harry Potter's so magical, why can't he cure his own eyesight?

Comic *Frankie Boyle*

A born-and-bred New Yorker is in the country when he sees a field of animals and says to the farmer, "What a strange-looking cow. Why doesn't it have horns?"

"Well, there are several reasons," the farmer replies. "Some cows get their horns late, while others have their horns cut off, and still others never even grow horns."

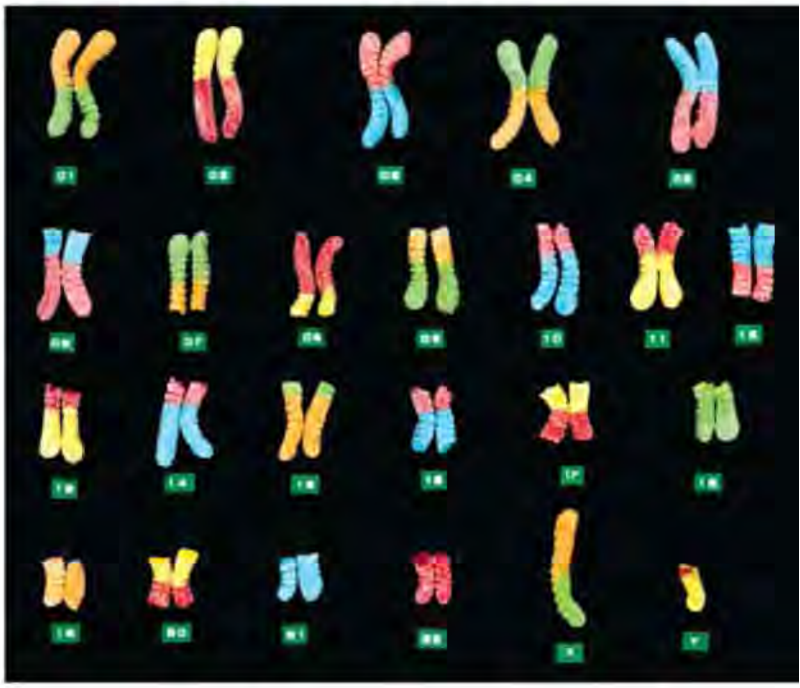
"And this cow?" the city man asks.

"Well, the reason this cow doesn't have any horns is that it's a horse."

Submitted by *Jacky Layton*

I have mixed emotions when I receive Father's Day gifts. I'm glad my children remember me, but I'm disappointed that they actually think I dress that way. Comic *Mike Dugan*

Y(UMMY) CHROMOSOMES



A chromosome is an organized structure of DNA, protein, and corn syrup. At least that's the composition of this string of chromosomes, which artist Kevin Van Aelst created from Gummi Worms. From kevinvanaelst.com

Your favorite new joke, funny anecdote, or crazy news story might be worth $$$. **See page 83 for details.**


COPD left me short of breath.
ABK 729
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Please read this summary carefully and then ask your doctor about SYMBICORT.

No advertisement can provide all the information needed to determine if a drug is right for you or take the place of careful discussions with your health care professional. Only your health care professional has the training to weigh the risks and benefits of a prescription drug.

WHAT IS THE MOST IMPORTANT INFORMATION I SHOULD KNOW ABOUT SYMBICORT?

In patients with asthma, long-acting beta$_2$-agonist (LABA) medicines, such as formoterol (one of the medicines in SYMBICORT), may increase the chance of death from asthma problems. In a large asthma study, more patients who used another LABA medicine died from asthma problems, compared with patients who did not use that LABA medicine. Talk with your health care professional about this risk and the benefits of treating your asthma with SYMBICORT.

SYMBICORT does not relieve sudden symptoms, so you should always have a fast-acting inhaler (short-acting beta$_2$-agonist medicine) with you. If you do not have this type of inhaler, talk with your health care professional to have one prescribed for you.

Get emergency medical care if your breathing problems worsen quickly and your fast-acting inhaler does not relieve them.

Do not stop using SYMBICORT unless your health care professional tells you to stop because your symptoms might get worse.

WHAT IS SYMBICORT?

SYMBICORT is an inhaled prescription medicine taken twice a day, every day, over long periods of time to control asthma and chronic obstructive pulmonary disease (COPD).

Asthma

SYMBICORT 80/4.5 mcg or 160/4.5 mcg is used long-term, two times each day, to control symptoms of asthma and prevent symptoms such as wheezing in patients age 12 years and older.

Chronic Obstructive Pulmonary Disease

COPD is a chronic lung disease that includes chronic bronchitis, emphysema, or both. SYMBICORT 160/4.5 mcg is used every day, two times each day, to help improve lung function for better breathing in adults with COPD.

SYMBICORT contains two medicines

- Budesonide (the same medicine found in PULMICORT FLEXHALER™ [budesonide inhalation powder]), an inhaled corticosteroid medicine, or ICS. ICS medicines help to decrease inflammation in the lungs. Inflammation in the lungs can lead to asthma symptoms
- Formoterol (the same medicine found in Foradil® Aerolizer®) is a long-acting beta$_2$-agonist medicine, or LABA. LABA medicines are used in patients with COPD and asthma. LABA medicines help the muscles in the airways of your lungs stay relaxed to prevent asthma symptoms, such as wheezing and shortness of breath. These symptoms can happen when the muscles in the airways tighten. This makes it hard to breathe, which, in severe cases, can cause breathing to stop completely if not treated right away

WHO SHOULD NOT TAKE SYMBICORT?

You should not take SYMBICORT if your health care professional decides that your asthma or COPD is well controlled using another medicine, or you only use a fast-acting inhaler once in a while.

Do not use SYMBICORT to treat sudden severe symptoms of asthma or COPD or if you are allergic to any of the ingredients in SYMBICORT.

Visit **www.MySymbicort.com**
Or, call **1-866-SYMBICORT**

Symbicort® (budesonide/formoterol fumarate dihydrate) Inhalation Aerosol

AstraZeneca

WHAT SHOULD I TELL MY HEALTH CARE PROFESSIONAL BEFORE USING SYMBICORT?

Tell your health care professional about all of your health conditions, including if you

- **have heart problems**
- **have high blood pressure**
- **have seizures**
- **have thyroid problems**
- **have diabetes**
- **have liver problems**
- **have osteoporosis**
- **have an immune system problem**
- **are allergic to any medications**
- **are exposed to chicken pox or measles**
- **are pregnant or planning to become pregnant** because it is not known if SYMBICORT may harm your unborn baby
- **are breast-feeding** because it is not known if SYMBICORT passes into your milk and if it can harm your baby. You and your health care professional should decide if you will be taking SYMBICORT while breast-feeding

Tell your health care professional about ALL the medicines you are taking, including all your prescription and nonprescription medicines, vitamins, and herbal supplements.

SYMBICORT and certain other medicines may interact with each other and can cause serious side effects. Be sure to keep track of ALL the medication you take. You might want to make a list and show it to your health care professional, including your pharmacist, each time you get any new medicine, just to be sure there are no potential drug interactions.

HOW DO I USE SYMBICORT?

Do not use SYMBICORT unless your health care professional has carefully demonstrated how to do so. If you have any questions concerning the use of SYMBICORT, ask your health care professional.

SYMBICORT should be taken twice (2 puffs each time) every day as prescribed by your health care professional.

SYMBICORT comes in 2 strengths for asthma: 80/4.5 mcg and 160/4.5 mcg. Your health care professional will prescribe the strength that is best for you. SYMBICORT 160/4.5 is the approved dosage for COPD.

- Make sure that you rinse your mouth with water after each dose (2 puffs) of SYMBICORT without swallowing and spit the water out
- Do not change or stop any of the medicines you use to control or treat your breathing problems. Your health care professional will adjust your medicines as needed
- Do not spray SYMBICORT in your eyes. If you accidentally get SYMBICORT in your eyes, rinse your eyes with water. If redness or irritation persists, call your health care professional
- Always have a fast-acting inhaler with you. Use it if you have breathing problems between doses of SYMBICORT

Seek emergency medical care if

- your breathing problems worsen quickly and your fast-acting inhaler does not relieve your breathing problems
- you experience any symptoms of a serious allergic reaction to SYMBICORT, such as a rash; hives; swelling of the face, mouth, or tongue; or breathing problems

Contact your health care professional if

- you need to use your fast-acting inhaler more often than usual
- your fast-acting inhaler does not work as well for you at relieving symptoms
- you need to use 4 or more inhalations of your fast-acting inhaler for 2 or more days in a row

- you use up your entire fast-acting inhaler canister within 8 weeks
- your peak-flow meter results decrease. Your health care professional will tell you the numbers that are right for you
- your asthma symptoms do not improve after using SYMBICORT regularly for 1 week
- you have COPD and notice any symptoms such as increase in mucus or change in mucus color, fever, chills, increased cough, or increased breathing problems because these symptoms may mean you have pneumonia or another lung infection

WHAT MEDICATIONS SHOULD I NOT TAKE WHEN USING SYMBICORT?

While you are using SYMBICORT, do not use other medicines that contain a long-acting beta$_2$-agonist (LABA) for any reason, such as

- Serevent® Diskus® (salmeterol xinafoate inhalation powder)
- Advair Diskus® or Advair® HFA (fluticasone propionate and salmeterol)
- Formoterol-containing products such as Foradil® Aerolizer®, Brovana®, or Perforomist®

WHAT ARE OTHER IMPORTANT SAFETY CONSIDERATIONS WITH SYMBICORT?

- Increased risk of pneumonia if you have COPD
- Eye problems, such as glaucoma and cataracts. Regular eye exams should be considered while using SYMBICORT
- Osteoporosis. People at risk for increased bone loss may have a greater risk with SYMBICORT
- Slowed growth in children. As a result, growth should be carefully monitored
- Immune system effects and a higher chance for infections
- Cardiovascular and central nervous system effects of LABAs, such as chest pain, increased blood pressure, fast or irregular heartbeat, tremor, or nervousness

WHAT ARE OTHER POSSIBLE SIDE EFFECTS WITH SYMBICORT?

Adults and children age 12 years and older with asthma

- Headache
- Sore throat
- Oral thrush
- Upper respiratory tract infection

Patients with COPD

- Oral thrush

Long-acting beta$_2$-agonists may increase the risk of asthma-related death. Tell your health care professional about any side effect that bothers you or that does not go away.

These are not all the side effects with SYMBICORT. Ask your health care professional for more information.

NOTE: This summary provides important information about SYMBICORT. For more information, please ask your doctor or health care professional about the full Prescribing Information and discuss it with him or her.

Manufactured for: AstraZeneca LP, Wilmington, DE 19850
By: AstraZeneca AB, Dunkerque, France
Product of France
Rev 9/09 288159

Visit **www.MySymbicort.com**
Or, call **1-866-SYMBICORT**

Symbicort® (budesonide/formoterol fumarate dihydrate) Inhalation Aerosol

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★ Heroes

'Don't Let Me Die!'

A man caught in a powerful current galvanizes a community

BY JOHN HANNAH

On a cold morning last November, Bob Heimann stood chest-deep in a seven-acre Nebraska lake struggling to free a blocked outlet pipe that, under ordinary circumstances, would be funneling water to the other side of the Thorston Dam. It was exhausting work, even for a 47-year-old who kept fit with weight training. The metal rod he was using to poke at the pipe was heavy, the water was 40 degrees, and the bottom of the lake was slippery. It was hard staying upright.



PHOTOGRAPHED BY JOANNA B. PINNEO

Barlean (left), Heimann, and Sousek with the pipe at Thorston Dam.

At 10:45, after five minutes of futile probing, Heimann rested his left foot on the lip of the 16-inch submerged pipe and took a breather. He was discussing other strategies with two coworkers onshore a few yards away when the lake's placid surface started to whirlpool. "This huge hole

Heimann was stuck fast—and in danger of being sucked under.

just opened up in front of me," Heimann recalls, "with a big swirl like a giant toilet getting flushed."

The blockage had given way, and now the pipe was sucking in thousands of tons of lake water. It whisked the rod out of Heimann's hands and snatched his left leg, pinning him in a crushing grip. The edge of the pipe, lodged behind his knee, was the only thing saving him from going under.

Heimann, an operations manager for the Lower Platte North Natural Resources District (LPNNRD), headquartered in Wahoo, Nebraska, hadn't been planning to spend the day wading in a lake. Earlier that morning, his coworkers—rural water manager Mike Sousek, 34, and maintenance technician Sam Barlean, 45—had called to tell him to bring his waders because their only pair had sprung a leak. When it turned out the waders were too

small for the other men, Heimann put them on and went in himself.

At first, Sousek says, he thought Heimann had slipped. "But then we saw his face and knew it was something worse."

"It's sucking me in!" Heimann recalls yelling to Sousek. Sousek jumped into the water and grabbed Heimann under the armpits, and Barlean reached out with a spade for Sousek to grab. They tried to pull Heimann out, but he was stuck fast—and in danger of being dragged under. Then the spade vanished under the water.

Sousek held Heimann in a bear hug, freeing Barlean to scramble out and get a cell phone from his nearby truck to call for help.

Meanwhile, Sousek concentrated on keeping Heimann's chin above water. "I had to talk us down, to keep us both from panicking," Sousek says. "I kept telling him, 'We're going to get this figured out. Just hold on.'" Hypothermia was setting in for both men, but Heimann didn't feel the cold. He was fighting the throbbing pain in his leg. "I was thinking about whatever I could do to save my life. I think I prayed. Finally I told Mike, 'Don't let me die.'"

Sousek asked Barlean to throw a ladder into the water. "We pushed it into the mud and stuck it under my left arm," says Heimann, who held on to the ladder for almost two hours—even as he drifted in and out of consciousness.

At 11:00, Saunders County sheriff Kevin Stukenholtz, 55, arrived. "I thought there'd been a drowning, until I saw Bob move," he says. He dropped his gun belt and jumped into the water to help Sousek. The Wahoo Volunteer Fire and Rescue Department arrived soon after, followed by other firefighters and divers from the surrounding area. As word of the emergency spread through the rural community, dozens of Nebraskans converged on Thorston Dam. Almost the entire staff of the LPNNRD office turned up. Within half an hour, a backhoe arrived, and a canoe. Jet Skis were brought in to help pull. But nothing could break the water's deadly clutch.

Heimann was weak, and his body temperature had dropped dangerously low. After 45 minutes in the water, Sousek finally allowed himself to be pulled out. He couldn't walk or unclench his hands.

Others worked feverishly to free Heimann. With a power saw and a pickax, firefighters cut a slot in the pipe on the other side of the dam. They jammed a two-inch-thick board and an inflatable bag designed for automobile rescues through the slot. Meanwhile, other rescuers pushed a second ladder under the one supporting Heimann, secured a strap around his thigh, and looped it over the ladders. "That gave us the leverage we needed," says Stukenholtz. Five men finally hoisted him out of the pipe.

Heimann was airlifted by helicopter to Creighton University Medical Center in Omaha and treated for hypothermia. His body temperature registered 80 degrees, and his heart rate had fallen to 20 beats per minute. Frostbitten flesh was removed from some of his left toes.

Nevertheless, ten days later, Heimann was back at work and playing basketball with his 15-year-old son, Nolan. "There's no way I can repay everybody," he says. "I was inches away from death. It's just incredible that I'm here."

THIS TOUR JUST GOT VERY INTERESTING



Our choir's tour manager was getting anxious because the deadline to hand in our rooming preferences had long passed.

She brought the group together and explained her dilemma, then concluded with this: "If you could all give me the list of whom you'd like to sleep with, we'll be on our way."

Laura Gobbo

FILLERS ILLUSTRATED BY NIGEL BUCHANAN


Because you never outgrow the deliciousness of chocolate, caramel and brownies.
New Chocolate Caramel Brownie. Decadence at 160 calories.
Only from Breyers® Smooth & Dreamy.™
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NEW Breyers Smooth & Dreamy™
Extra Creamy
Chocolate Caramel Brownie
160 calories per sandwich
6 SANDWICHES

50 Ways to Lend a Hand

Raegan Payne vowed to complete that many charity activities in one year, blogging every inspiring and surprising step of the way

BY PETRA GUGLIELMETTI



PHOTOGRAPHED BY ROBERT SEBREE

Raegan Payne couldn't travel home to see her family in Kentucky one Thanksgiving because plane tickets were too pricey. Stuck in downtown Los Angeles, living near Skid Row, she decided to volunteer at the Midnight Mission soup kitchen and asked a friend to

"I loved bottle-feeding kittens for a shelter."

join her. "He was not really into the idea," recalls Payne, a writer and actress who has appeared in *Charmed* and *The Closer*. "It was clear that he had misconceptions about what it would be like." Without a partner, Payne abandoned her plan. Soon she realized why some people refrain from volunteering—fear of the unknown: Will I find someone to talk to? Will I know what to do?

"I wanted to show people how many different ways there are to get involved."

To help others fight those fears and to demystify volunteer work, Payne—a do-gooder since her Girl Scout days—began blogging about her various charitable endeavors on her website, thegoodmuse.com. After her grandfather passed away in December 2008, a more ambitious project took shape. "Pa had been the greatest supporter in every crazy thing I've ever decided to do," Payne explains. "He was also a very giving person, so I said, Okay, what am I going to do to honor him?"

She decided she'd complete 50 different volunteer projects by 2010, chronicling each on her blog—the good, the bad, the amusing, and the ridiculous. (Even Payne laughs about the time she wore four-inch heels to a soggy cemetery in the middle of the night to help read 58,261 names off a Vietnam veterans memorial.) "I wanted to show people how many different ways there are to get involved," she says.

Last year, on December 19, Payne completed her 50th activity—or episode, as she calls each of her projects on her blog. They included some memorable moments: churning up enough instant potatoes to feed 1,600 people (episode 22), helping children write their autobiographies (No. 19), bartending at the opening of an exhibit of photographs taken by homeless women (No. 29), hand-sanding the exterior of a historic mansion in need of fresh paint (No. 15), bottle-feeding kittens for a shelter (No. 18), recording audio versions of books for the blind (No. 25), and assembling care packages for soldiers (No. 34). For her final challenge, she lopped off nine inches of her red hair and donated it to an organization that provides wigs to kids who have lost their hair.

In seeking out activities on sites like serve.gov and volunteermatch.org, Payne often wandered outside her comfort zone, like the time she voiced support for marine protection areas during a public hearing (No. 30). "Even though I'm an actress, public speaking is still nerve-racking for me," she says.

Along the way, Payne picked up a few tips: "If you're going to volunteer for a kitchen organization, bring a baseball cap—they might


Oscar Mayer
Score.
Make your kid's day. Our bologna has 75% less sugar than a PB&J* and is 100% tasty.
Beef Bologna
it doesn't get better than this
*Peanut Butter & Jelly Sandwich: 18g sugar, 18g fat, 3.5g saturated fat, 500mg sodium
Bologna Sandwich w/fat-free mayo: 4g sugar, 10g fat, 4.0g saturated fat, 770mg sodium
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let you tuck your hair into a hat instead of a hairnet." And: "There is a fine line between volunteering and getting in the way."

Payne intends to keep trying new activities (a charity polar bear plunge in 31-degree water is on the agenda). And she will continue projects that have grown on her, like reading to elementary school kids once a month. "I'd never gotten on a schedule before," she says. "But now when I show up, the kids run across the playground and throw their arms around me. It's such a great feeling."

Know someone who is making it matter as a volunteer? E-mail us at readersdigest.com/makeitmatter.

Face Value

For decades, the low-income residents of rural Nelson County, Virginia, had nowhere to go when decay ate into their teeth or when the pain got so bad, they couldn't chew. With one phone call, dentist Michael Sherwood changed that. "If there are angels in this world, he is one of them," says Peggy Whitehead of the county's Blue Ridge Medical Center.



Sherwood, 67, who had retired from private practice and moved to the area with his wife, Kathryn, knew that studies link poor oral health to an increased risk of heart attack and stroke. When he offered to work free for two mornings a week if he had a place to practice, the county of 15,000—between Charlottesville and Lynchburg—rallied. An old trailer became office space, a community center donated a parking area for it, the Blue Ridge clinic secured equipment and found the money to hire an assistant, and a volunteer group offered to drive patients to appointments.

The Nelson Dental Clinic opened in March 2008. Since then, Sherwood has seen about 350 adults. Some had never visited a dentist. "There are two main reasons," he says. "Finances and fear."

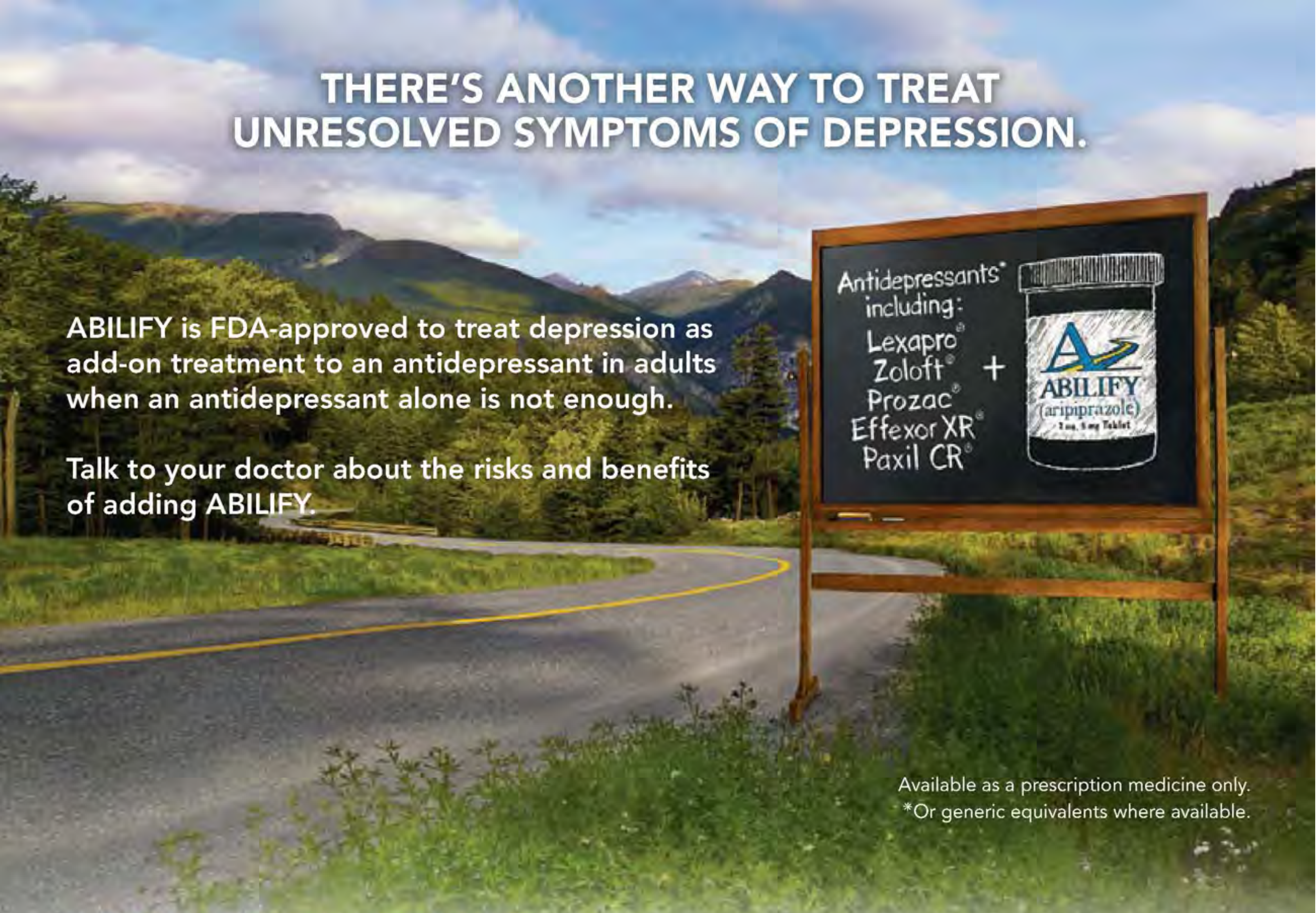
As a result, he spends more time on extractions and dentures than on routine care and fillings. The patients, he says, "thank me over and over again. Some cry when I finish restoring their front teeth so they can smile again."

Only those without dental insurance and earning less than $21,660 a year ($44,100 for a family of four) can qualify for the clinic. Patients pay $5 per visit and receive hundreds of dollars' worth of dental care. Sherwood has even found a way to get $1,200 dentures for just $200.

The conditions Sherwood works under aren't easy. The trailer is more than 50 years old (it has blown over a few times, luckily with no one inside); it has patched holes in the floor and chronic electrical problems. "We have old, old hand tools," says Sherwood, "so I have to improvise."

The clinic's annual budget is about $46,000, most of it from foundation grants. There are plans for a new space, but fundraising is going slowly. Meanwhile, demand is growing. That's why Sherwood increased his time to two full days a week, to do what he loves best: give people back their smiles.

Michelle Crouch



IMPORTANT SAFETY INFORMATION:

Elderly patients with dementia-related psychosis (eg, an inability to perform daily activities due to increased memory loss) taking ABILIFY have an increased risk of death or stroke. ABILIFY is not approved for treating these patients.

Antidepressants can increase suicidal thoughts and behaviors in children, teens, and young adults. Serious mental illnesses are themselves associated with an increase in the risk of suicide. When taking ABILIFY call your doctor right away if you have new or worsening depression symptoms, unusual changes in behavior, or thoughts of suicide. Patients and their caregivers should be especially observant within the first few months of treatment or after a change in dose. Approved only for adults 18 and over with depression.

- Call your doctor if you develop very high fever, rigid muscles, shaking, confusion, sweating, or increased heart rate and blood pressure, as these may be signs of a rare but potentially fatal condition called **neuroleptic malignant syndrome (NMS)**
- If you develop abnormal or uncontrollable facial movements, tell your doctor, as these may be signs of **tardive dyskinesia (TD)**, which could become permanent
- If you have **diabetes** or have risk factors or symptoms of diabetes, your blood sugar should be monitored. High blood sugar has been reported with ABILIFY and medicines like it. In some cases, extreme high blood sugar can lead to coma or death
- **Other risks** may include lightheadedness upon standing, decreases in white blood cells (which can be serious), seizures, trouble swallowing, or impairment in judgment or motor skills. Until you know how ABILIFY affects you, you should not drive or operate machinery

The **common side effects** in adults in clinical trials (≥10%) include nausea, vomiting, constipation, headache, dizziness, an inner sense of restlessness or need to move (akathisia), anxiety, and insomnia. Tell your doctor about all the medicines you're taking, since there are some risks for drug interactions. You should avoid alcohol while taking ABILIFY.

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch, or call 1-800-FDA-1088.

Please read the additional Important Information about ABILIFY on the adjacent page.

*Lexapro® (escitalopram oxalate), Zoloft® (sertraline HCl), Prozac® (fluoxetine hydrochloride), Effexor XR® (venlafaxine HCl), Paxil CR® (paroxetine HCl) are trademarks of their respective companies.

ABILIFY®
(aripiprazole)
2 mg, 5 mg Tablet

IF AN ANTIDEPRESSANT ALONE ISN'T ENOUGH.

www.ABILIFYtreatment.com

If you or someone you know needs help paying for medicine, call 1-888-4PPA-NOW (1-888-477-2669). Or go to www.pparx.org

Partnership for Prescription Assistance

IMPORTANT INFORMATION ABOUT ABILIFY

ABILIFY® (aripiprazole) 2, 5, 10, 15, 20, 30 mg Tablets

This summary of the Package Insert contains risk and safety information for patients about ABILIFY. This summary does not include all information about ABILIFY and is not meant to take the place of discussions with your healthcare professional about your treatment. Please read this important information carefully before you start taking ABILIFY and discuss any questions about ABILIFY with your healthcare professional.

Name

ABILIFY® **(a-BIL-ĭ-fī)** (aripiprazole) (air-rĭ-PIP-ra-zoll)

What is ABILIFY (aripiprazole)?

ABILIFY is a prescription medicine used as an add-on treatment to an antidepressant for adults with Major Depressive Disorder who had an inadequate response to antidepressant therapy.

What is depression?

Depression is a common but serious medical condition. Symptoms may include sadness, loss of interest in activities you once enjoyed, loss of energy, difficulty concentrating or making decisions, feelings of worthlessness or excessive guilt, insomnia or excessive sleep, a change in appetite causing weight loss or gain, or thoughts of death or suicide. These could be depression symptoms if they interfere with daily life at home, at work, or with friends and last most of the day, nearly every day for at least 2 weeks.

What is the most important information that I should know about antidepressant medicines, depression, and other serious mental illnesses?

- Antidepressant medicines may increase suicidal thoughts or actions in some children, teenagers, and young adults
- Depression and serious mental illnesses are the most important causes of suicidal thoughts and actions

For more information, see the Prescribing Information and the Medication Guide called *Antidepressant Medicines, Depression and Other Serious Mental Illnesses, and Suicidal Thoughts or Actions.*

Who should NOT take ABILIFY?

People who are allergic to ABILIFY or to any substance that is in it. Allergic reactions have ranged from rash, hives and itching to difficulty breathing and swelling of the face, lips, or tongue. Please talk with your healthcare professional.

What is the most important information that I should know about ABILIFY?

Elderly patients, diagnosed with psychosis as a result of dementia (for example, an inability to perform daily activities as a result of increased memory loss), and who are treated with antipsychotic medicines including ABILIFY, are at an increased risk of death when compared to patients who are treated with a placebo (sugar pill). ABILIFY is not approved for the treatment of patients with dementia-related psychosis.

Antidepressants may increase suicidal thoughts or behaviors in some children, teenagers, and young adults, especially within the first few months of treatment or when the dose is changed. Depression and other serious mental illnesses are themselves associated with an increase in the risk of suicide. Patients on antidepressants and their families or caregivers should watch for new or worsening depression symptoms, unusual changes in behavior, or thoughts of suicide. Such symptoms should be reported to the patient's healthcare professional right away, especially if they are severe or occur suddenly. ABILIFY is not approved for use in pediatric patients with depression.

Serious side effects can occur with any antipsychotic medicine, including ABILIFY (aripiprazole). Tell your healthcare professional right away if you have any conditions or side effects, including the following:

Stroke or ministroke in elderly patients with dementia: An increased risk of stroke and ministroke has been reported in clinical studies of elderly patients with dementia (for example, increased memory loss and inability to perform daily activities). ABILIFY is not approved for treating patients with dementia.

Neuroleptic malignant syndrome (NMS): Very high fever, rigid muscles, shaking, confusion, sweating, or increased heart rate and blood pressure **may be signs of NMS, a rare but serious side effect that could be fatal.**

Tardive dyskinesia (TD): Abnormal or uncontrollable movements of face, tongue, or other parts of body may be signs of a serious condition known as TD, which may be permanent.

High blood sugar and diabetes: Patients with diabetes and those having risk factors for diabetes (for example, obesity, family history of diabetes), as well as those with symptoms such as unexpected increases in thirst, urination, or hunger should have their blood sugar levels checked before and during treatment. Increases in blood sugar levels (hyperglycemia), in some cases serious and associated with coma or death, have been reported in patients taking ABILIFY, and medicines like it.

Orthostatic hypotension: Lightheadedness or faintness caused by a sudden change in heart rate and blood pressure when rising too quickly from a sitting or lying position (orthostatic hypotension) has been reported with ABILIFY.

Leukopenia, Neutropenia, and Agranulocytosis: Decreases in white blood cells (infection fighting cells) have been reported in some patients taking antipsychotic agents, including ABILIFY. Patients with a history of a significant decrease in white blood cell (WBC) count or who have experienced a low WBC due to drug therapy should have their blood tested and monitored during the first few months of therapy.

Suicidal thoughts: If you have suicidal thoughts, you should tell your healthcare professional right away.

Dysphagia: Medicines like ABILIFY have been associated with swallowing problems (dysphagia). If you had or have swallowing problems, you should tell your healthcare professional.

What should I talk to my healthcare provider about?

Patients and their families or caregivers should watch for new or worsening depression symptoms, unusual changes in behavior and thoughts of suicide, as well as for anxiety, agitation, panic attacks, difficulty sleeping, irritability, hostility, aggressiveness, impulsivity, restlessness, or extreme hyperactivity. Call your healthcare provider right away if you have thoughts of suicide or if any of these symptoms are severe or occur suddenly. Be especially observant within the first few months of antidepressant treatment or whenever there is a change in dose.

Tell your healthcare provider about any medical conditions you may have and all medicines that you are taking or plan to take, including prescription and over-the-counter medicines, vitamins, or herbal products.

Be sure to tell your healthcare provider:

- If you have suicidal thoughts
- If you have or have had a low white blood cell count (WBC)
- If you or anyone in your family have or had seizures
- If you or anyone in your family have or had high blood sugar or diabetes
- If you are pregnant, plan to become pregnant, or are breast-feeding

What should I avoid when taking ABILIFY (aripiprazole)?

- Avoid overheating and dehydration
- Avoid driving or operating hazardous machinery until you know how ABILIFY affects you
- Avoid drinking alcohol
- Avoid breast-feeding an infant

What are the possible side effects of ABILIFY?

Common side effects in adults include: nausea, vomiting, constipation, headache, dizziness, an inner sense of restlessness or need to move (akathisia), anxiety and insomnia.

It is important to contact your healthcare professional if you experience prolonged, abnormal muscle spasm or contraction which may be signs of a condition called dystonia.

This is not a complete list of side effects. For full patient information, visit www.abilify.com. Talk to your healthcare professional if you have questions or develop any side effects.

What percentage of people stopped taking ABILIFY due to side effects?

In clinical trials, the percentage of adults who discontinued taking ABILIFY due to side effects was 6% and 2% for patients treated with sugar pill.

Can I safely take ABILIFY while I'm taking other medications?

ABILIFY can be taken with most drugs; however, taking ABILIFY with some medicines may require your healthcare professional to adjust the dosage of ABILIFY.

Some medicines* include:

- ketoconazole (NIZORAL®)
- quinidine (QUINIDEX®)
- fluoxetine (PROZAC®)
- paroxetine (PAXIL®)
- carbamazepine (TEGRETOL®)

It is important to tell your healthcare professional about all the medicines you're taking, just to be sure.

How should I take ABILIFY (aripiprazole)?

- Take ABILIFY exactly as directed by your healthcare professional
- ABILIFY is usually taken once a day and can be taken with or without food
- If you miss a dose, take it as soon as you remember. However, if it is time for your next dose, skip the missed dose and take only your regularly scheduled dose
- Talk to your healthcare professional before stopping ABILIFY or changing your dose

General advice about ABILIFY:

- ABILIFY should be kept out of the reach of children and pets
- Store ABILIFY Tablets and the Oral Solution at room temperature
- For patients who must limit their sugar intake, be aware that **ABILIFY Oral Solution contains sugar**
- For patients who cannot metabolize phenylalanine (those with phenylketonuria or PKU), **ABILIFY DISCMELT® contains phenylalanine**
- If you have additional questions, talk to your healthcare professional

Find out more about ABILIFY:

Additional information can be found at **www.abilify.com**

*NIZORAL is a registered trademark of Janssen Pharmaceutica; QUINIDEX is a registered trademark of Wyeth Pharmaceuticals; PROZAC is a registered trademark of Eli Lilly and Company; PAXIL is a registered trademark of GlaxoSmithKline; TEGRETOL is a registered trademark of Novartis Pharmaceuticals.

Based on Full Prescribing Information as of 11/09 1239550A7.

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Outrageous

MICHAEL CROWLEY

Phony Farmers

Billions in tax dollars go to frauds who have never plowed a field. How did the system get so corrupt?

A dead man farming? That was the unsettling image that came to mind last November, when a Miami television station analyzed records of federal farm subsidies paid to South Florida residents. By cross-referencing payments against death notices, the reporters found that at least 234 people listed as deceased were still getting checks from Washington; some had been dead for as long as eight years. All told, about $9.5 million in farm subsidies went to folks who were pushing up plants, not harvesting them.

And then there are the rich phonies taking handouts. A government audit found that of the 1.8 million so-called farmers who received federal funds between 2003 and 2006, 2,702 of them had adjusted gross incomes of more than $2.5 million. The list included the co-owner of an unnamed sports team who hauled in $200,000 a year, as well as wealthy residents of the United Kingdom, Saudi Arabia, and Hong Kong—people who are generally not eligible for U.S. government handouts. In all, these millionaires have enriched themselves to the tune



Michael Crowley is a senior editor at the *New Republic.*

ILLUSTRATED BY BRIAN STAUFFER; KAREN BALLARD/REDUX

of $49 million in taxpayer money.

Why in the world is Washington sending subsidy checks to millionaires, foreign residents, and corpses? The answer can be found in one of the most maddening federal programs around: farm subsidies. Every year, the government spends more than $13 billion on subsidies to farmers and agribusinesses—much of it in cash payments that keep coming regardless of economic and crop conditions. A worthy program conceived during the Great Depression to help struggling American farmers has become a slush fund for corporations—and it remains one of Washington's biggest sacred cows.

A worthy program meant to help farmers has become a slush fund for corporations.

"Farm subsidies are America's largest corporate welfare program," says the Heritage Foundation's Brian Riedl. "They survive as a case study in special interest politics."

The agricultural industry, with 1,200 registered lobbyists in Washington, spends about $133 million a year to make sure the money keeps flowing. Defenders of farm supports like to hold up the classic image of a hardworking American farmer in his overalls. But small farmers aren't getting much more than the crust of this pie. Seventy-five percent of all farm subsidies go to just 10 percent of recipients, according to the watchdog Environmental Working Group.

"So rather than this idea that we are helping family farms or helping the little guy weather the storm, we are subsidizing some of the wealthiest farms in the country," says Steve Ellis of Taxpayers for Common Sense. The top recipients of farm subsidies don't have names like Jones or Smith but rather Riceland Foods, Inc., Harvest States Cooperative, and the South Dakota Building Authority.

Oh, and don't forget the people who are paid *not* to farm. In 1996, Congress approved payments for farmers regardless of whether they planted, as long as they didn't develop their land. The payments were supposed to be temporary help and then phased out. But—surprise, surprise!—they kept on coming. And now anyone who owns a patch of land that was declared a farm back then is entitled to an annual government check. Between 2000 and 2006, the government sent $1.3 billion to people who don't farm, according to the *Washington Post*.

How does a crazy program like this survive? As usual in Washington: lobbyists. When Congress passed its last big farm bill, in 2008, calls for slashing subsidies came from left and right. But when Rep. Ron Kind, a Democrat from Wisconsin, cosponsored an amendment to actually limit the payments, the

response "was a siege on Capitol Hill, with the lobbyists pounding doors and twisting arms."

In the end, the lobbyists won. Congress passed a five-year, $300 billion plan that *increased* subsidy payments. Couples with adjusted gross incomes of up to $1.5 million from farming are still able to qualify for help under the new rules.

It's not just lobbyists who keep this racket going; our lawmakers are guilty too. Take Sen. Kent Conrad, a Democrat from North Dakota, who came to Congress in 1986 vowing to resign if the federal deficit wasn't brought under control. He kept his promise but seven months later ran again. Now, more than 20 years since he first took office, the deficit has grown by a factor of seven, and Conrad is still on the job, winning big farm subsidies for his state. Although nearly half of North Dakota's 647,000 residents live in urban areas, over the past decade, it has received an annual average of $715 million in agricultural subsidies—$22,000 a year for every farm in the state. As an author of the 2008 farm bill, Conrad included a new $3.8 billion emergency fund to bail out farmers hit by natural disasters like droughts and floods. Since the bill passed, North Dakotans have received $23 million from the fund; only Texas has gotten more.

Other members of Congress have profited from subsidies directly. Arkansas Democratic senator Blanche Lincoln's family received more than $700,000 over a ten-year period, and Republican Iowa senator Chuck Grassley, a millionaire deficit hawk, reaped $238,000 in federal dollars from 1995 to 2006.

President Obama has proposed new limits on farm subsidies. Congress has basically ignored him. The president should put his foot down. It's time for representatives from states gorging on federal bucks to show political courage. The sacrifice should be shared, to be sure. Farm states should join with states that benefit from unneeded Pentagon programs to divvy up the pain of cuts. Otherwise, we'll never get control of our budget. And we'll still be sending checks to dead farmers and Hong Kong millionaires.

Outraged? Tell Michael Crowley about it at readersdigest.com/crowley.

Do More

> **Investigate** See who gets farm subsidies at the Environmental Working Group's state-by-state database (farm.ewg.org/farm).

> **Speak up** Contact the House and Senate agriculture committee chairs, Rep. Collin Peterson (202-225-2165) and Sen. Blanche Lincoln (202-224-4843), and tell them to stop the wasteful spending.

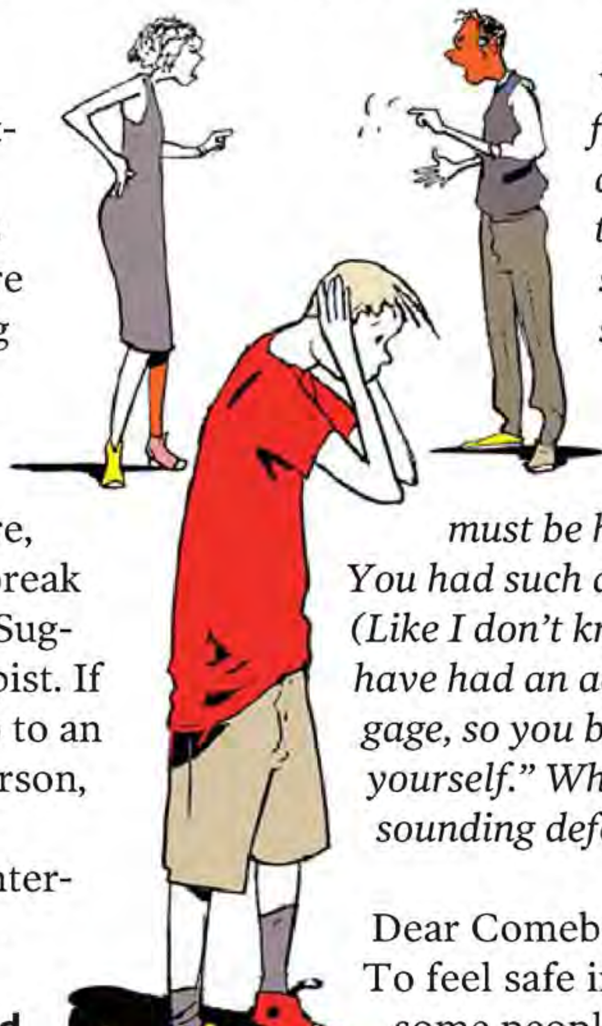
> **Help out** real family farmers. For 25 years, Farm Aid (farmaid.org) has provided funds and services directly to family farmers in crisis.



Ask Laskas

JEANNE MARIE LASKAS

I'm 15 years old, *and I love my mom and dad, but they argue constantly. Even when they aren't fighting, they just act angry all the time. I can live with it when we don't have guests, but when my friends are over, I'm mortified. I've asked my parents to stop, but nothing changes. How can I get their attention?* 'Bout Had It



Dear 'Bout,
Unacceptable parenting! Tell them their constant fighting has gotten so bad, you are embarrassed to bring friends home. Raise your hand and say, "Hello! There's a kid in the picture here, and the kid needs a break from all this anger!" Suggest they get a therapist. If that doesn't work, go to an aunt, uncle, clergyperson, doctor—any trusted grown-up who can intervene on your behalf.

When my husband *was laid off last year, we lost our house and had to move into a mobile home. I've coped with a lot in the past few months, but I am undone by the thoughtlessness of our so-called friends. Instead of support in our time of crisis, our friends offer tactless opinions: "You must be heartbroken living here! You had such a beautiful home!" (Like I don't know.) Or "You must have had an adjustable rate mortgage, so you brought this mess on yourself." What can I say without sounding defensive?* Comeback Kid

Dear Comeback,
To feel safe in their own lives, some people convince themselves that victims cause their own suffering. The person who criticizes your adjustable rate mortgage probably blames your husband for losing his job. The faulty logic

Jeanne Marie Laskas is not a shrink, but she does have uncommon sense.

ILLUSTRATED BY ISTVAN BANYAI; FRANK VERONSKY

goes like this: "I'm too smart to go for an ARM, and my husband is too amazing to ever get downsized!" In other words, "I'm not like them, and so I'm immune to tragedy!" Nonsense, of course, but a common rationalization. Nothing you can say will enlighten these folks, so take the high road. Each time someone says something stupid, remind yourself that you're doing the best you can and that you're strengthened by adversity. Notice that the rude folks are usually those who haven't yet gone through their own hard times; those who have tend to be a lot more charitable—and likable!

My older sister is *in her 40s and has many close friends, but a steady relationship seems to elude her. For some time now, she has been making frequent "poor me" remarks, comparing my "lucky, wonderful" marriage with her "lonely" single life. I'm torn between guilt over having a good man to confide in and anger at her presumption that married life is a bed of roses. My guilt is fed in part by a request from our mother, now deceased, who asked me to take care of my big sister because "she is alone in this world." How can I help her without encouraging this self-pity?* Selfish Little Sis

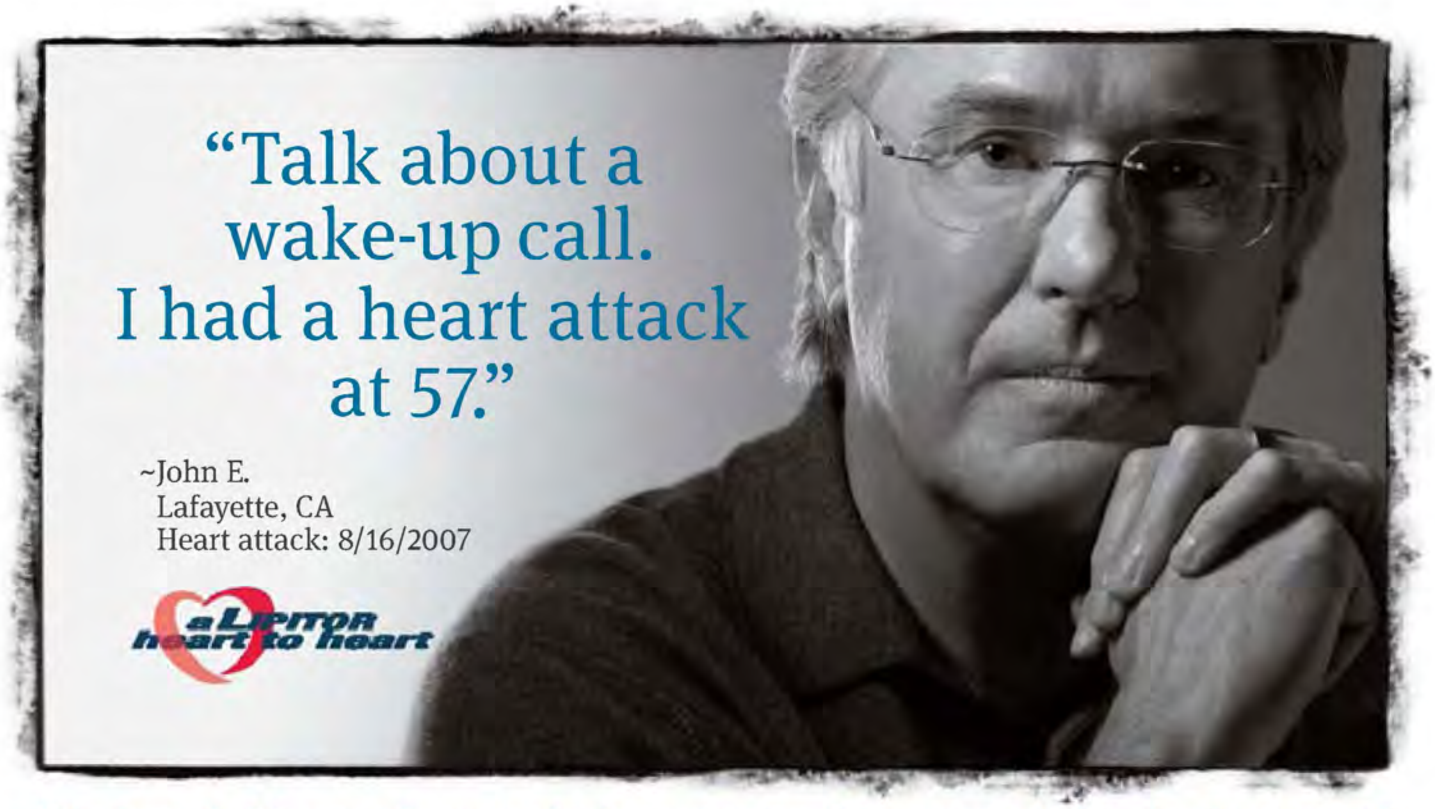
Dear Sis,
No, no, no! Stop with the guilt! Guilt is a bully, and it's holding you hostage. Break free. Just because your sister doesn't like her life doesn't mean you can't like yours. I promise you, this is not what your mother meant by "take care of your sister." Explain that every bed of roses has its share of thorns—yours included. Get her out of her head: Join a health club with her, go on a girls' weekend together, join her in a class learning to do something you both enjoy. Let your love of life become infectious! Hint: It's not about finding a handsome prince to rescue her.

Life's Little Etiquette Conundrums

When my husband and I were married a year and a half ago, I didn't have a bridal shower; our registry was very limited because we had a small apartment and no need for traditional wedding gifts. Now that we've purchased a home, I'd love to be able to register for the things we need. Would it be inappropriate to have a shower this long after the wedding? Would it be tacky to have a housewarming registry?

In a word: yes! In three words: Don't do it! The time for a wedding shower is long over, and sorry, but you missed your turn for the big-ticket items. Now, that doesn't mean you can't throw a housewarming party. Invite friends and relatives to see your new home, and if they choose to bring a gift, accept it with gratitude. But realize that your relationships and your reputation are more important than a free toaster and some flatware.

Send questions about manners, parents, partners, or office politics to readersdigest.com/laskas. Sending gives us permission to edit and publish.



"I should have been doing more for my high cholesterol. I learned the hard way. Now I trust my heart to Lipitor." Talk to your doctor about your risk and about Lipitor.

IMPORTANT SAFETY INFORMATION:
LIPITOR is not for everyone. It is not for those with liver problems. And it is not for women who are nursing, pregnant or may become pregnant.

If you take LIPITOR, tell your doctor if you feel any new muscle pain or weakness. This could be a sign of rare but serious muscle side effects. Tell your doctor about all medications you take. This may help avoid serious drug interactions. Your doctor should do blood tests to check your liver function before and during treatment and may adjust your dose.

Common side effects are diarrhea, upset stomach, muscle and joint pain, and changes in some blood tests.

You are encouraged to report negative side effects of prescription drugs to the FDA.

Visit www.fda.gov/medwatch or call 1-800-FDA-1088.

- **When diet and exercise are not enough, adding Lipitor may help. Lipitor is FDA-approved to reduce the risk of heart attack and stroke in patients who have heart disease or risk factors for heart disease, including family history of early heart disease, high blood pressure, low good cholesterol, age and smoking.**
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Have a heart to heart with your doctor about your risk.
And about Lipitor.

Call 1-888-LIPITOR (1-888-547-4867)
or visit www.lipitor.com/john

INDICATION:
LIPITOR is a prescription medicine that is used along with a low-fat diet. It lowers the LDL ("bad" cholesterol) and triglycerides in your blood. It can raise your HDL ("good" cholesterol) as well. LIPITOR can lower the risk for heart attack, stroke, certain types of heart surgery, and chest pain in patients who have heart disease or risk factors for heart disease such as age, smoking, high blood pressure, low HDL, or family history of early heart disease.

LIPITOR can lower the risk for heart attack or stroke in patients with diabetes and risk factors such as diabetic eye or kidney problems, smoking, or high blood pressure.

Please see additional important information on next pages.

LIPITOR®
atorvastatin calcium
tablets

IMPORTANT FACTS

LIPITOR atorvastatin calcium tablets (LIP-ih-tore)

LOWERING YOUR HIGH CHOLESTEROL

High cholesterol is more than just a number, it's a risk factor that should not be ignored. If your doctor said you have high cholesterol, you may be at an increased risk for heart attack and stroke. But the good news is, you can take steps to lower your cholesterol.

With the help of your doctor and a cholesterol-lowering medicine like LIPITOR, along with diet and exercise, you could be on your way to lowering your cholesterol.

Ready to start eating right and exercising more? Talk to your doctor and visit the American Heart Association at www.americanheart.org.

WHO IS LIPITOR FOR?

Who can take LIPITOR:

- People who cannot lower their cholesterol enough with diet and exercise
- Adults and children over 10

Who should NOT take LIPITOR:

- Women who are pregnant, may be pregnant, or may become pregnant. LIPITOR may harm your unborn baby. If you become pregnant, stop LIPITOR and call your doctor right away.
- Women who are breast-feeding. LIPITOR can pass into your breast milk and may harm your baby.
- People with liver problems
- People allergic to anything in LIPITOR

BEFORE YOU START LIPITOR

Tell your doctor:

- About all medications you take, including prescriptions, over-the-counter medications, vitamins, and herbal supplements
- If you have muscle aches or weakness
- If you drink more than 2 alcoholic drinks a day
- If you have diabetes or kidney problems
- If you have a thyroid problem

ABOUT LIPITOR

LIPITOR is a prescription medicine. Along with diet and exercise, it lowers "bad" cholesterol in your blood. It can also raise "good" cholesterol (HDL-C).

LIPITOR can lower the risk of heart attack, stroke, certain types of heart surgery, and chest pain in patients who have heart disease or risk factors for heart disease such as:

- age, smoking, high blood pressure, low HDL-C, family history of early heart disease

LIPITOR can lower the risk of heart attack or stroke in patients with diabetes and risk factors such as diabetic eye or kidney problems, smoking, or high blood pressure.

POSSIBLE SIDE EFFECTS OF LIPITOR

Serious side effects in a small number of people:

- **Muscle problems** that can lead to kidney problems, including kidney failure. Your chance for muscle problems is higher if you take certain other medicines with LIPITOR.
- **Liver problems**. Your doctor may do blood tests to check your liver before you start LIPITOR and while you are taking it.

Call your doctor right away if you have:

- Unexplained muscle weakness or pain, especially if you have a fever or feel very tired
- Allergic reactions including swelling of the face, lips, tongue, and/or throat that may cause difficulty in breathing or swallowing which may require treatment right away
- Nausea, vomiting, or stomach pain
- Feeling more tired than usual
- Allergic skin reactions
- Brown or dark-colored urine
- Your skin and the whites of your eyes turn yellow

Common side effects of LIPITOR are:

- Diarrhea
- Muscle and joint pain
- Upset stomach
- Changes in some blood tests

HOW TO TAKE LIPITOR

Do:

- Take LIPITOR as prescribed by your doctor.
- Try to eat heart-healthy foods while you take LIPITOR.
- Take LIPITOR at any time of day, with or without food.
- If you miss a dose, take it as soon as you remember. But if it has been more than 12 hours since your missed dose, wait. Take the next dose at your regular time.

Don't:

- Do not change or stop your dose before talking to your doctor.
- Do not start new medicines before talking to your doctor.
- Do not give your LIPITOR to other people. It may harm them even if your problems are the same.
- Do not break the tablet.

NEED MORE INFORMATION?

- Ask your doctor or health care provider.
- Talk to your pharmacist.
- Go to **www.lipitor.com** or call **1-888-LIPITOR**.

Rx only

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Here's the Deal

JANICE LIEBERMAN

Escape Plan

It's vacation time! Stop paying too much and worrying about what you're getting—here's how.



There's nothing worse than anticipating a much-needed getaway, traveling all day to get there, and discovering it's a dump—for $300 a night. It's why the whole vacation-planning process makes me nervous: With so many sites and so many choices, how do I know I'm getting the best deal? (I happily turned the job over to my husband, Steve, who doesn't mind trolling online for days.) So what do the experts recommend to make the process easier *and* rewarding? Here's how to get the best prices with the fewest clicks, plus backup sites to help you feel better about your decision.

Become an expert well in advance. George Hobica of airfarewatchdog.com suggests signing up for e-mail alerts and online newsletters. It's the best way to familiarize yourself with destinations and prices. "All the travel sites do things a little differently," Hobica says, "so sign up for several, and check them daily." (A dedicated Gmail or Yahoo e-mail address will cut down on the spam in your main e-mail account.) In other words, for now, keep your mind open and your wallet closed. Yapta.com and bing.com are the best, Hobica says, but

Janice Lieberman is the consumer correspondent on NBC's *Today* show.

ILLUSTRATED BY MICK WIGGINS; INFINITYPHOTOGRAPHYINC.COM

also try orbitz.com, kayak.com, shermanstravel.com, smartertravel.com, travel-ticker.com, and travelzoo.com. And don't forget to ask friends on Twitter and Facebook for their tips.

Decide on a few destinations. Now that you have a better sense of what's out there, you want to work backward. Barbara Messing of travel-ticker.com explains, "Don't fixate on one place. Let the deal be your inspiration." Her team combs the Internet for deals that offer reductions of 40 to 60 percent. One recent example: the four-star Meritage Resort and Spa in Napa Valley wine country for as low as $109 a night (a 45 percent savings), with a wine tasting for two and 20 percent off spa treatments. "Dealhounds" on airfarewatchdog.com scour the Web all day for the latest and best deals.

Reassure yourself. Before committing, play detective. For videos of hotels, restaurants, activities, and attractions, go to tripfilms.com and insiderperks.com. Tripfilms depends on travelers for their observations, while the videos on InsiderPerks are created by the site's staff. Watch both to get a good overview of your destination. Browse through other families' vacation photos on flickr.com (it's okay—really), and read candid reviews by travelers on tripadvisor.com.

Search for the lowest airfare. Experts consider kayak.com the best first step in searching for low-cost airline deals (it doesn't include Southwest, so you'll have to check the airline separately). To find out if the fare is likely to rise or fall over the next seven days, check bing.com's Price Predictor. You'll almost always get a better deal if you're flexible—you can fly out on one carrier and return on another, for example, or fly to an offbeat airport like Bob Hope Airport in Burbank, California (15 miles outside L.A.), or Midway in Chicago. Voyij.com searches the Web for the best sales, promotions, and package deals from your departure city. If you care where you sit, check seatexpert.com for a guide to the best, and worst, seats. Lock in your rate, but don't pull the trigger yet. (Depending on the airline, you may have ten minutes to 24 hours to commit, so do the next steps—fees and hotels—quickly.)

Find the hidden fees. If you want to know the *real* price of the ticket, check Airline Fees: The Ultimate Guide at smartertravel.com. Will you have to pay for that blanket, the soda, *and* the pretzels? Some airlines charge up to $100 extra for a seat with more legroom. Most charge $15 to $25 to check a bag; anyone traveling after July 31 on Spirit will pay up to $45 for a carry-on bag. To find out what your airline charges, go to its website or check the Guide. Then compare with FedEx, UPS, and U.S. Postal Service rates. "Depending on the route and method," says Hobica, "the cost savings from shipping versus schlepping can range from little or nothing to dramatic."


FACT: Surfaces can harbor allergens that may cause allergic reactions.
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LYSOL,® the brand you trust to kill 99.9% of germs, is now approved to control allergens on surfaces, all to help protect your family. Lysol Wipes remove 90% of allergens,* and Lysol Spray kills the source of mold allergens.**
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Get a room, then book your flight. Hotels.com features over 70,000 properties, from small bed-and-breakfasts to all-inclusive luxury resorts. The site flagged a special deal recently at Wyndham Glenview Suites in Chicago: Stay four nights and pay $69 a night, a 40 percent savings. For unbiased shots of lobbies, rooms, and neighborhoods, go to tvtrip.com. At oyster.com, you get photos, plus the pros and cons.

If you always end up with the room next to the ice machine or elevator shaft, click on tripkick.com for the good, the bad, and the ugly about hotels in more than 20 U.S. cities and some international destinations. If you prefer to rent a house, go to otalo.com. It's to vacation house rentals what kayak.com is to airfares. Refine your search by cost, number of bedrooms, and must-haves like a pool and a welcome mat for your poodle; photos are included. Once you've booked your room, book your flight.

Rent a car before you leave. If you don't care which car-rental company you use, head to hotwire.com for deep discounts on rentals, says Anne Banas of smartertravel.com. Check rates for both airport and off-site pickup. Sometimes you can save on airport fees and taxes by picking up your car just outside the airport. (If there's no free shuttle service, factor in the cost of a cab. Off-site hours may be limited.)

Avoid getting lost, hungry, and annoyed. For terminal maps, on- and off-site parking, ground transportation, handicapped accessibility, estimates on how long the security check will take, and where to eat or drink, go to ifly.com.

Follow that plane. What do you do when there's been a delay and the gate agent doesn't have any more info than you do? Check on your flight, either online or with a free iPhone or iPod Touch app, with FlightAware Flight Tracker. It tracks by airline and flight number, or route, within five minutes of real time (flightaware.com).

Once you've landed ... "Check in" at Foursquare, a free app for iPhones, BlackBerrys, Palms, and Android phones. Tell your friends where you are, and get their recommendations on the hot spots in town. If they're in the area, they just might join you.

Read Janice Lieberman's blog and submit your questions at readersdigest.com/askjanice.

Sites for Savings

- **costtodrive.com** Calculate the cost—mileage, gas, travel time, and carbon footprint—of driving anywhere in the United States.
- **goldstar.com** Buy tickets at half price to sports events, comedy shows, the opera, the theater, and concerts.
- **myshoes.com** Find the perfect pair of shoes at the lowest price (up to 40 percent off). Hundreds of brands and 30 retailers (Zappos too).

Pick One. Just One.



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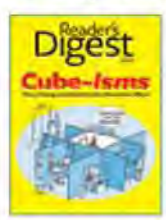


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PHOTOGRAPHED BY VERN EVANS

The Chief Banana

On the attack against junk food snacks, Chris Mittelstaedt made fresh fruit his business

BY MARGARET HEFFERNAN

Chris Mittelstaedt remembers the exact moment he got serious about working for himself. "I was 27 years old," he says, "running faxes at a hotel in San Francisco for $9.50 an hour, for a guy who complained frequently about being hungover—and my wife was pregnant. I knew then I needed to change my life."

That was 13 years ago. Today Mittelstaedt is CEO of the FruitGuys, a $6 million company that ships over 100,000 pieces of fruit every week to more than

"Whatever the problem, there has to be a solution."

1,000 businesses, from small firms to Fortune 500 corporations. For many of the company's corporate clients, the fruit, which is shared in kitchenettes and break areas, is an important part of an overall healthy-living program. Mittelstaedt calls it "team-building wellness in a box."

He called himself the chief banana, dressed up in a banana suit, and handed out fruit.

"When you put fruit in front of people—even with candy bars right there—they will eat the fruit," he says. "It's all about access. And those healthy choices, studies show, benefit everyone: lower rates of heart disease and diabetes but also increased productivity, less absenteeism, and better attitudes."

The company (fruitguys.com) delivers to homes and schools too. And each of its 36 employees can take a free box of fruit every week, plus an extra one for a favorite cause—schoolkids, the homeless, or ailing parents. The company says it also donates over 40 tons of fresh fruit a year to nonprofit groups, food pantries, and families in need.

Mittelstaedt, whose business experience consisted of running his own house-painting company in college, was living in San Francisco at the height of the dot-com boom when he got his entrepreneurial brainstorm. His friends were working insane hours and gaining weight from eating chocolate-covered espresso beans. Why not deliver fresh fruit to offices so the employees could eat good food instead of junk food? he thought.

"I called 500 companies," says Mittelstaedt. "Two were willing to pay up front. With $200 in seed money, I built wooden crates and stenciled my home phone number on them. I bought fruit and loaded it into a friend's car. There was no room for me, so I tagged along on a motor scooter."

Mittelstaedt borrowed $20,000 from his father, a business school professor, to help launch his new venture. He called himself the chief banana, dressed up in a banana suit, and handed out fruit on the street. Clever marketing and hard work paid off: Within two years, the company's revenues hit a million dollars.

When Mittelstaedt got a tip that Webvan, the online grocer, was going out of business and selling its refrigerated trucks at a huge discount, he bought five. Two months later, the dot-com bubble burst. "I thought I was such a cool, brilliant businessman," he says. "But I ended up with $100,000 in credit card debt. The worst part was having to lay off half the staff."

Determined not to go under, Mittelstaedt went back into start-up mode. He'd buy fruit at 2 a.m., pack it into crates and onto trucks alongside his crew, then spend his days delivering the fruit, handling customer service, doing the bookkeeping, and following up new leads.

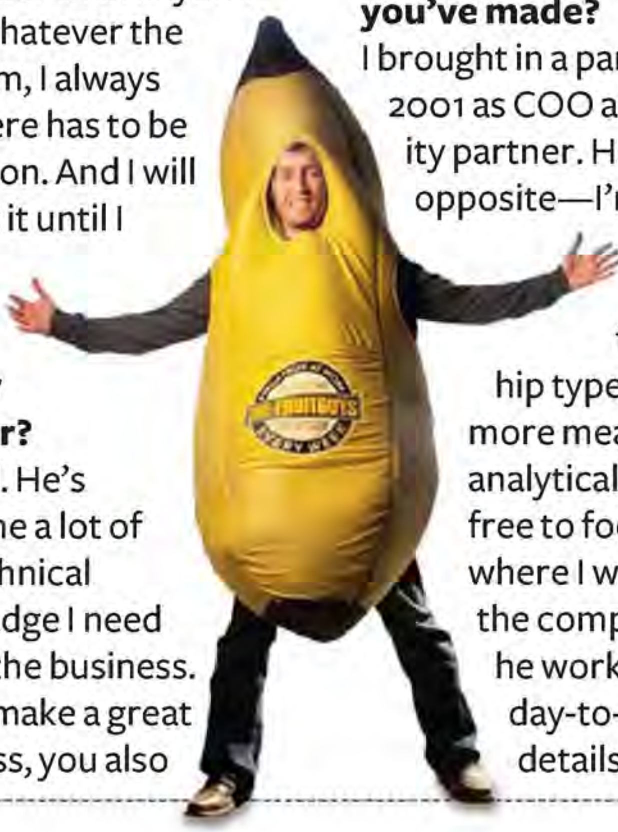
His life at home was no less stressful. "I was exhausted," recalls Mittelstaedt. "My wife, Pia, had just given birth to twins and was nursing

Getting Ahead with CHRIS MITTELSTAEDT

Do your kids like fruit?
My 12-year-old son and one of my nine-year-old twins are big fruit eaters. They've grown up with the business, making forts out of banana boxes.

What makes you an entrepreneur?
I was the kid who organized flashlight tag games. When I played baseball, I never won awards for hitting the longest ball. I got the Charlie Hustle award for working harder than anyone else. Whatever the problem, I always feel there has to be a solution. And I will keep at it until I find it.

Who is your mentor?
My dad. He's given me a lot of the technical knowledge I need to run the business. But to make a great business, you also have to know the purpose of the business. The mission-driven part is what motivates me.



Is your fruit organic?
In the beginning, we were 100 percent organic, but some companies didn't buy because it was too expensive. Now our first preference is organic, but we sometimes ship nonorganic too.

What is the best business decision you've made?
I brought in a partner in 2001 as COO and minority partner. He's my opposite—I'm enthusiastic, a shoot-from-the-hip type, while he's more measured and analytical. I'm now free to focus on where I want to take the company, while he works on the day-to-day details.

How will you know when you're successful?
You're never safe. I grew up hearing stories about how even very successful companies can fail after 100 years. You have to be vigilant, and not just because of the competition. Your own actions can erode the business over time.

What keeps you up at night?
I am constantly questioning my judgment and decisions. Is the business stable? Are we capable of change? Are we responding to our customers?

What's the most important characteristic for an entrepreneur?
Perseverance. I played rugby in college, and I'm only five-foot-seven. You learn how to take a beating, then get up and do what you need to do.

Have a business? Ready to start one? Still dreaming? Get help at readersdigest.com/business.

both babies while stuffing envelopes. It was crazy!"

To avoid being too dependent on the Bay Area economy, Mittelstaedt knew he had to expand. He designed and patented crumple-proof boxes made from recycled cardboard and rented warehouses in Philadelphia and Chicago to reduce transportation costs in the East and Midwest. Each boxed delivery includes as many U.S.-grown varieties—like Asian pears, pineapple guavas, and persimmons—as possible. And Mittelstaedt always tries to include locally grown produce.

He also invested in family farms that were trying to keep their orchards intact. He installed bat houses at suppliers' farms because bats eat the insects that damage fruit trees. By 2012, some of the Asian pears the company delivers will come from trees Mittelstaedt and his family planted as part of the company's Farm Steward program.

Looking back, Mittelstaedt acknowledges that he got complacent during the dot-com bubble, forgetting a lesson his father had taught him. "My dad is also a pilot," he says. "When he was teaching me to fly, he always said, 'Think about the small mistakes that end up big because you weren't paying attention to the dashboard.' That's my mantra: What is the dashboard telling me? What do I need to pay attention to *now*? I'm managing the business today to make it work tomorrow." ■

@Work

My wife, a real estate agent, wrote an ad for a house she was listing. The house had a second-floor suite that could be accessed using a lift chair that slid along the staircase. Quickly describing this feature, she inadvertently made it sound even more attractive: "Mother-in-law suite comes with an electric chair."

Michael Kimmit



Adventures in Title Writing

What's the toughest part about writing a book? It's deciding what to call it, as these finalists for the Diagram Prize for Oddest Book Title of the Year prove.

- *Afterthoughts of a Worm Hunter*
- *An Intellectual History of Cannibalism*
- *Father Christmas Needs a Wee!*
- *Collectible Spoons of the 3rd Reich*
- *The Changing World of Inflammatory Bowel Disease*

When a patient was wheeled into our emergency room, I was the nurse on duty. "On a scale of zero to ten," I asked her, "with zero representing no pain and ten representing excruciating pain, what would you say your pain level is now?"

She shook her head. "Oh, I don't know. I'm not good with math."

D. Andrews, RN

My husband and I attended a bridal fair trying to drum up work for his fledgling wedding photography business. One vendor assumed we were engaged and asked when the big day was.

A coworker stormed into my friend's office, yelling, "Did you tell Joan I was a witch?!" Stunned, my friend sputtered, "No! I don't know how she found out."

George O'Brien

ILLUSTRATED BY SCOTT MASEAR

WANTED: PRETTY MUCH ANYONE

Here's an ad for a job that should be filled quickly: "Animal Hospital is seeking an Assistant. Must be flexible, reliable, and irresponsible."
Margery Johnson

This job requires a specialist: "A local corporation is seeking a medical billing specialist. 2 years exp. bilking Medicare."
Phyllis Clark

The pay for this gig is whatever you can haul away: "Need someone to sit with elderly man. Must have excellent references and current police record." *Emily Boone*

"Oh, we've been married ten years," I said.

"Really?" she asked. "But you look so happy." *Iona Dorsey*

Our company was conducting free body mass index checkups. When a stout colleague climbed onto the machine, it spit out a slip of paper telling him what his weight-to-height ratio was and what it ought to be.

"What does it say?" I asked.

He replied, "I need to increase my height by six inches." *Sobby Kurian*

As a salesperson, I do a lot of business over the phone. One man who called to place an order had a nice voice, so when he asked if I wanted his number, I took the opportunity to offer mine as well.

"Um," he stammered, "I was talking about my purchase-order number." *Iris Madderom*

Business of the Month

In these tough times, there are certain things we must all learn to stint on. Toilet paper, though, is not one of them. Waitrose, a high-end British supermarket, wants to turn your toilet into a throne with toilet paper made from cashmere. And the store is selling it for the unprincely sum of $3.60 for a four-pack. "It's the little luxuries that put a smile on your face," says a company spokesman.

Off Base

The day after the Haitian earthquake, I got a frantic call from my daughter in Florida.

"What's wrong?" I asked.

"Nate's been called up by the National Guard. He's going to Haiti," she said. Then came the tears: "I didn't even know we were at war with Haiti!" *Thomas Jordan*



My five-year-old grandson was looking through some old photos when he noticed his grandfather in his Marine dress blues.

"What kind of costume is that?" he asked.

"That's not a costume," his grandfather growled. "Men have died for that uniform."

The boy looked up and said, "So you stole it, then?" *Arletta Lehr*

I served in a parachute regiment. During a nighttime exercise, I was seated next to a young officer. He was looking a bit pale, so I asked, "Scared, lieutenant?"

"No," he replied. "Apprehensive."

"What's the difference?"

"That means I'm scared, but with a university education."

Thomas Ellsworth, gcfl.net

As he flew to Atlanta on a commercial airline, the admiral I worked for struck up a conversation with his elderly seatmate. She asked how he liked the Navy.

"I love it," he answered. "It's the best thing I've ever done."

"How nice," she said. "So do you think you'll make it a career?"

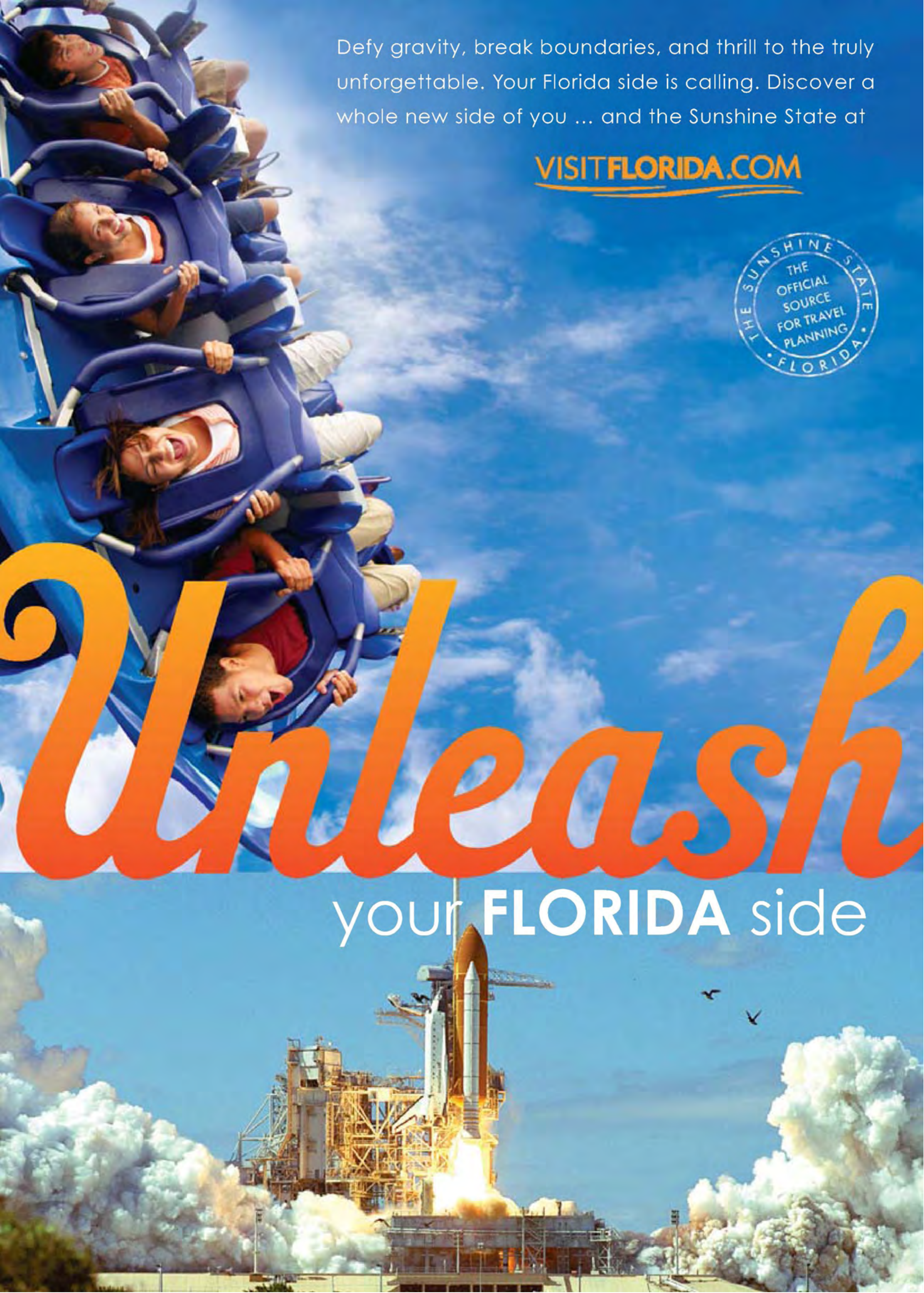
Bill Nelson

Your favorite new joke, funny military anecdote, or crazy news story might be worth $$$. See page 83 for details.

ILLUSTRATED BY DAN REYNOLDS


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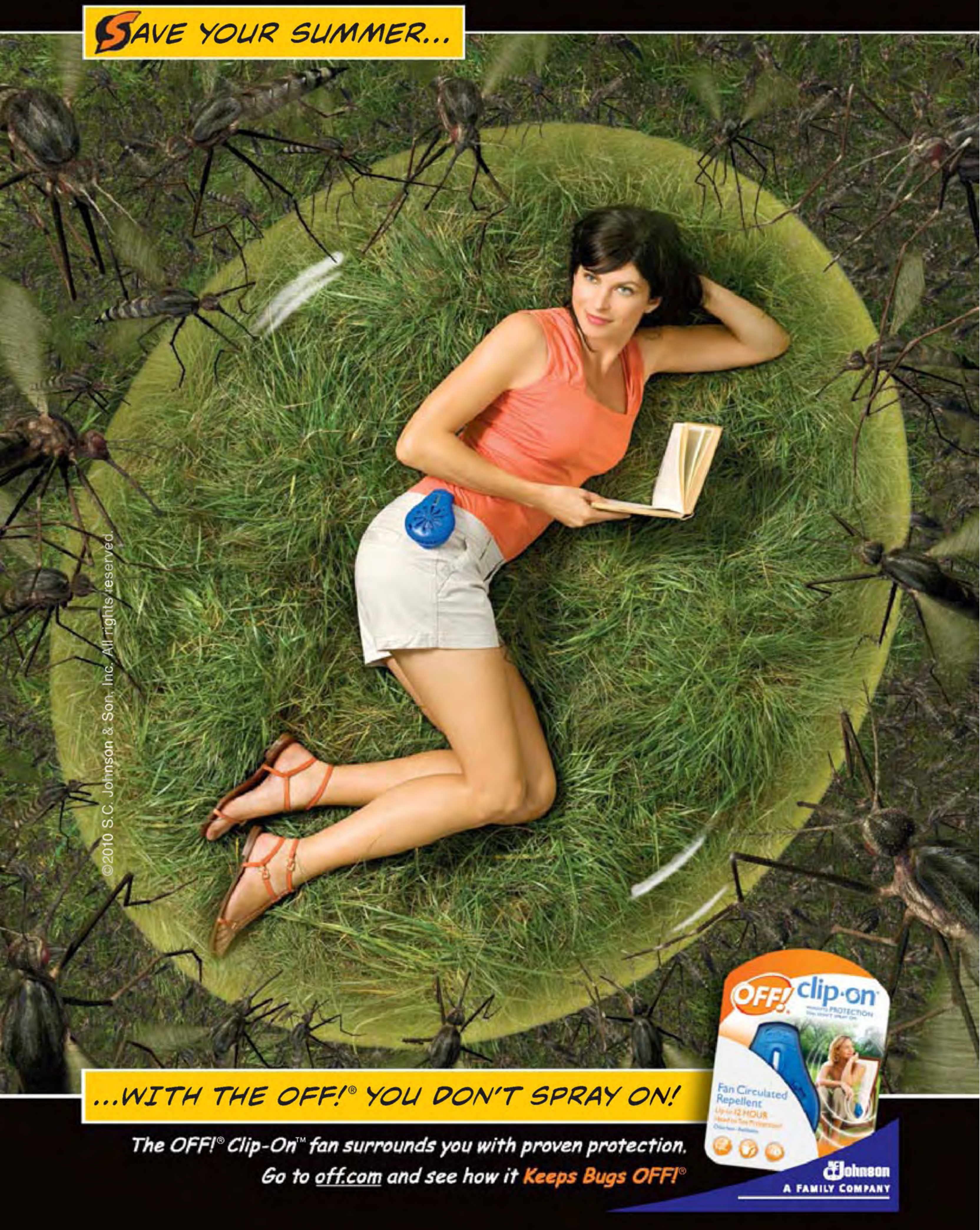


Whether you're hosting a pool party or a beach bonfire, summer is the best time for outdoor fun.

- Keep summer fun uncomplicated: casual dress, simple decorations, and plenty of games and activities.
- Watch out for weather. Have a back-up space or rain date, and remember to windproof: Use pretty rocks or shells to weigh down tablecloths and paper goods, and wrap utensils in napkins tied with twine.
- Take advantage of seasonal flowers, plants, and even herbs for your centerpieces and decorations.
- Have misters filled with ice water for guests to use to cool themselves down.
- If you're hosting a family-friendly bash, be sure to have plenty for the kids to do. Try a fun summer scavenger hunt, karaoke challenge, or some arts and crafts projects.
- Keep guests comfortable and protected with **OFF! Clip-On Mosquito Repellent**—odorless personal mosquito repellent you don't spray on. Clip it on or set it next to guests—the quiet battery-powered fan circulates repellent within minutes—and it lasts up to 12 hours.

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VALERIE JANSSEN/FOODPIX/GETTY IMAGES

3 Rules for Summer Food Safety

If you think sunburn is your biggest worry this summer, consider this: Approximately 75 million cases of food-borne illness are reported every year, and more occur from June through August than during any other season, experts say. That's because stomach-churning bacteria thrive in hot weather (especially 90°F-plus). Fortunately, recent research has identified important new steps you can take to protect yourself:

1. Make your marinade tangy

Adding vinegar or lemon juice to your marinade could make your meat safer, according to a new study. "Acidic marinades tend to slow the growth of bacteria on meat," says Melvin Hunt, PhD, a professor of food science at Kansas State University. Just soak properly: Marinate in the refrigerator, not on the counter. Poultry and cubed meats shouldn't be marinated for

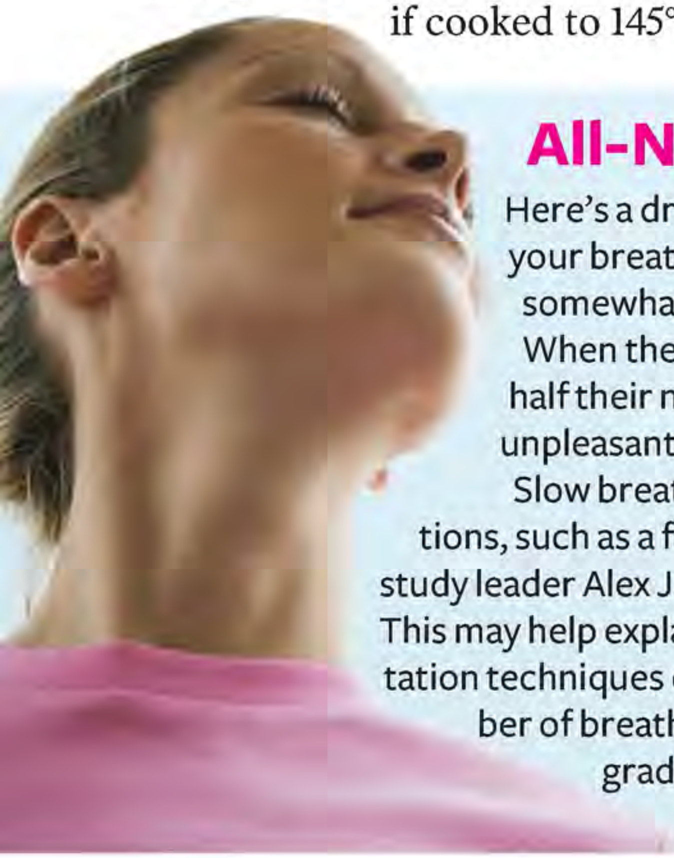
more than two days, but it's okay to leave beef, pork, and lamb in the mixture for five days.

2. Think temperature, not color, for burgers

You can't rely on color or texture to indicate doneness. In recent studies, factors like how ground beef was packaged affected the meat's color as it cooked—some patties turned brown before they reached a safe temperature, while others were pink in the middle after thorough cooking. Heat your burger to an internal temperature of 160°F; use a food thermometer. You can be more relaxed about whole cuts of beef (if they haven't been "blade-tenderized" or had flavoring injected) because surface bacteria are destroyed through cooking. These cuts are safe if cooked to 145°F.

3. Don't count on prewashed

Leafy greens (like lettuce, spinach, and cabbage) constitute the riskiest food regulated by the FDA, according to the Center for Science in the Public Interest. What's more, bagged salad greens are more likely to cause digestive problems than whole heads. The reason: Cut leaves are more vulnerable to bacteria, and the large volume of greens handled together means a higher risk for cross-contamination. There's no need to swear off salads, but do wash even prewashed lettuce and other cut greens. Thoroughly rinse leaves in cold water, use a salad spinner to remove most of the water, then blot dry with a clean cloth or paper towel. And don't let a bag of lettuce sit around: Refrigerate it within two hours of buying, and use within a week. *Elizabeth Drake*



All-Natural Pain Relief

Here's a drug-free way to ease moderate pain: Simply slow your breathing. In a recent study, researchers briefly applied somewhat painful pulses of heat to the palms of 52 women. When the volunteers were instructed to breathe at roughly half their normal rate, their ratings of pain intensity and unpleasantness dropped by as much as 30 percent.

Slow breathing seems to damp down the body's stress reactions, such as a faster heart rate and higher blood pressure, says study leader Alex J. Zautra, PhD, at Arizona State University in Tempe. This may help explain why other studies have found that some meditation techniques can reduce pain. To get the benefit, count the number of breaths you take in a minute, then sit quietly while gradually slowing the rate. *Beth Howard*

ANGELO CAVALLI/IONICA/GETTY IMAGES

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Calcium: A Key to Long Life?

Who would have thought that the fountain of youth spouts ... milk? But that's the striking suggestion from a recent study at the Karolinska Institutet in Stockholm. Researchers followed more than 23,000 middle-aged and older men for a decade and found that those who reported getting plenty of calcium in their diet, about 2,000 mg per day, were 25 percent less likely to die in that time than men who consumed little of the mineral in food and drink. It's possible that the high-calcium diners had other healthy habits, the researchers say. But a diet containing lots of the mineral is known to lower blood pressure, cholesterol, and blood sugar levels.

The Swedish study was all-male, but calcium expert Robert P. Heaney, MD, at Omaha's Creighton University, thinks the results are likely to apply to women too. He suggests all adults aim for 2,000 mg of calcium per day—from food, if possible, because other nutrients amplify its effect. American adults get only about 700 mg of calcium in their diet each day, on average. But it's easy to sneak more into your menu. Drinking milk with meals gets you about 300 mg of calcium per eight-ounce glass; if you're lactose-intolerant, yogurt (up to 450 mg per cup of low-fat) and cheese (410 mg per half cup of shredded Cheddar) are easier to digest. You can also try the less obvious sources pictured here. *E. D.*



Cooked broccoli
62 mg per cup



Fortified soy milk
299 mg per 8 ounces



Cooked spinach
245 mg per cup



Edamame (baby soybeans)
98 mg per cup



Almonds
190 mg per ½ cup

Very high triglycerides is a medical term for something serious:

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If you have high cholesterol, high blood pressure, or diabetes, you may also have very high triglycerides, which is a serious medical condition. LOVAZA, along with diet, has been clinically proven to effectively lower very high triglycerides*, but has not been shown to prevent heart attacks or strokes. LOVAZA is the only FDA-approved medication made from omega-3 fish oil. It's purified. It's concentrated. And you can't get it at a health food store. Ask your doctor about LOVAZA—the prescription that starts in the sea.

*Individual results may vary.

Important Safety Information for LOVAZA

LOVAZA, along with diet, helps to lower very high triglycerides (≥500 mg/dL) in adult patients. Tell your doctor if you are allergic to fish or shellfish as LOVAZA may not be right for you. Talk to your doctor about any medical conditions you have and any medications you are taking, especially those that may increase your risk of bleeding. In some patients, LDL (bad) cholesterol may increase. Your healthcare provider should do blood tests before and during treatment with LOVAZA to check your cholesterol and triglyceride levels. If you have liver disease, you may require additional monitoring. Possible side effects include burping, infection, flu-like symptoms, upset stomach and change in sense of taste.

How supplied: 1-gram capsule

Please see important Patient Information on the next page.

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch, or call 1-800-FDA-1088.

Ask your doctor if LOVAZA is right for you
Visit LOVAZA.com or call 1-877-LOVAZA1

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PATIENT INFORMATION
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What is LOVAZA?

LOVAZA is a prescription medicine, called a lipid-regulating medicine, for adults. LOVAZA is made of omega-3 fatty acids from oils of fish, such as salmon and mackerel. Omega-3 fatty acids are substances that your body needs but cannot produce itself.

LOVAZA is used along with a low-fat and low-cholesterol diet to lower very high triglycerides (fats) in your blood. Before taking LOVAZA, talk to your healthcare provider about how you can lower high blood fats by:

- losing weight, if you are overweight
- increasing physical exercise

Treatment with LOVAZA has not been shown to prevent heart attacks or strokes.

LOVAZA has not been studied in children under the age of 18 years.

What should I tell my doctor before taking LOVAZA?

Tell your doctor about all of your medical conditions and all the medicines you take, including prescription and non-prescription medicine, vitamins, and herbal supplements. LOVAZA and certain other medicines can interact causing serious side effects.
Especially tell your doctor if you take medicines:

- To reduce clotting–known as anticoagulants or blood thinners. These include aspirin, warfarin, coumarin and clopidogrel (PLAVIX®).

Tell your doctor if you are allergic to fish and/or shellfish.

LOVAZA may not be right for you.

Who should NOT take LOVAZA?

Do not take LOVAZA if you:

- **are allergic to LOVAZA or any of its ingredients.**

What are the possible side effects of LOVAZA?

The most common side effects with LOVAZA are burping, infection, flu symptoms, upset stomach and change in sense of taste.

LOVAZA may affect certain blood tests. It may change:

- One of the tests to check liver function (ALT)
- One of the tests to measure cholesterol levels (LDL-C)

Talk to your doctor if you have side effects that bother you or that will not go away.

These are not all the side effects with LOVAZA. Ask your doctor or pharmacist for a complete list.

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September 2009



Quench Your Crankiness

Next time your mood takes a dive, have a drink—of water. In a recent Tufts University study, college athletes who weren't given fluids during practice felt more confused, angry, tense, and blue afterward than those who had plenty of water. "The level of dehydration was very mild—it could easily be compared with what busy office workers might experience if they forgot to drink enough during the day," says lead researcher Kristen E. D'Anci, PhD.

How much you need to drink depends on the weather and your activity level and weight. Still, D'Anci says, "eight 8-ounce glasses of water a day never hurt anybody."

Janis Graham

The Hidden Perks of Helping

Lending a hand after hours may make your day job more enjoyable. Researchers from the University of Konstanz in Germany studied more than 100 people who worked five days a week and also volunteered for about seven hours weekly. What they found: Work felt less burdensome the day after a volunteer stint—even if the unpaid duties, like fire and rescue work, weren't exactly relaxing. The study suggests that if you really want to shed job stress, vegging out may not be the best way to do it, says lead author Eva J. Mojza, PhD. Challenging extracurricular activities will yank your attention away from the demands of your career and send you back to work with the satisfaction of a job well done. *B. H.*

What You Don't Know About Sunscreen

Protecting yourself from the sun seems pretty straightforward: Just smear on some sunscreen and go. But judging from a new study, you're probably doing it wrong. In a survey of 423 adults at New York City's Memorial Sloan-Kettering Cancer Center, fewer than a third were aware that sunscreen should be applied 30 minutes before going outside (it takes that long for it to soak into skin and create a shield). And a mere 18 percent knew that you need a full ounce of the stuff, about two tablespoons, to adequately cover your bathing-suited body. These misunderstandings aren't minor, says lead researcher Steven Q. Wang, MD—they mean you're not properly shielded from the sun's damaging rays. His guide:

Pick a sunscreen with an SPF of 50. That's high enough to filter out 98 percent of the sun's UVB rays—the ones that burn your skin. Using a product with a higher SPF can actually backfire, because these lotions allow you to stay in the sun longer without burning but don't necessarily provide equally long-lasting protection against UVA rays—the tanning rays, which have also been linked to skin cancer. The FDA is changing its labeling rules to help clarify how well different sunscreens guard against all kinds of ultraviolet rays, but you won't see the smarter labels on store shelves for a year or more.



Check ingredients. Since SPF doesn't tell you anything about UVA protection, look for 3 percent avobenzone paired with octocrylene. Or choose a sunscreen that contains zinc oxide or titanium dioxide. Don't worry: Today's formulas won't give you a white "lifeguard nose."

Be generous. Squeeze out enough sunscreen to fill a shot glass.

Apply often. You need to put on sunscreen 30 minutes before going outside, but don't stop there. You lose protection when you sweat or swim or just rub your skin, so reapply every two hours. *J. G.*

Quick Study

Greener Grass

BY KATHLEEN FIFIELD

Lawns are becoming battle zones, with national groups and local neighborhoods fighting about weeding, feeding, watering, mowing, and sowing. The environmental issues in your front yard.

Flash Points

▶ **Mandatory maintenance** Green lawns—yours, your neighbors'—are good for property values, and the pressure for upkeep can be intense. In some places, it's nonnegotiable—as Betty Perry, a 70-year-old widow in Orem, Utah, found out. In July 2007, after refusing to provide her name to a police officer who had cited her for a less-than-lush yard, she was led to jail in handcuffs.

▶ **Water wars** While the average American family uses about 30 percent of its water outdoors, that number spikes to 70 percent in the West, where water is especially scarce. Last year, Clark County, Nevada, banned planting turf in the front yards of new homes. The EPA is now offering incentives to builders to design landscapes that use a "regionally appropriate" amount of water. Grass is probably the largest irrigated crop in this country, says Cristina Milesi, a NASA-funded researcher.

▶ **Fertilizer overkill?** Americans buy some 4.5 million tons of chemical fertilizer a year—mostly concentrated, water-soluble products that may dish out more nutrients than your lawn can use. Phosphorus and nitrogen can run off during rainstorms, contaminating drinking water and leaching into rivers and streams and turbo-feeding algae, which then dies and smothers fish. Another downside: It takes lots of fossil fuel to manufacture most synthetic fertilizers.

▶ **Pesticides** Moms worried about the effects of pesticides on their kids' health have led to a "quantum shift" in awareness of organic lawn care, says Paul Tukey, founder of safelawns.org. In Canada, more than 100 cities, including Toronto, restrict the use of pesticides. Nothing prevents U.S. cities from doing the same. But lobbyists have helped pass "preemption laws" in 41 states to make community pesticide bans illegal.

▶ **Redefining a weed** What, exactly, is a lawn invader, and what needs to be eradicated? Some "weeds," like white clover, cut down on grubs, and others, like yellow dock, ferry nutrients from deep in the soil to your grass.

ILLUSTRATED BY HEADCASE DESIGN

Building a Better Backyard

HARDSCAPING
Patios and pavers can reduce the 40 hours a year a typical homeowner spends on lawn maintenance.

RAIN CATCHMENT SYSTEM
A simple rain barrel saves the average gardener 1,300 gallons of water a summer.

COMPOST BIN
Using homegrown fertilizer saves a typical homeowner some $50 a year.

NATIVE PLANTS
Beds of wildflowers or moss cost 68 percent less to maintain than grass.

PUSH MOWER
Push-mower users burn 408 calories an hour and spend only $5 a year on maintenance.

LAWN PROBLEMS	CHEMICAL FIX	WHY YOU SHOULD SWITCH	TRY THIS INSTEAD
Weeds	Glyphosate	Skin and eye irritant	Corn gluten meal
Pests	Carbaryl	Likely to be carcinogenic in humans, says the EPA	Azadirachtin, from the seeds of the neem tree
Grubs	Trichlorfon	Can affect the nervous system in humans	Beneficial nematodes, tiny worms that attack grubs

Forward Thinking

▶ **New seeds** Drought-tolerant grasses like sheep fescue, buffalo grass, and blue grama are all widely available from seed suppliers. This year, Scotts introduced Turf Builder EZ Seed, which uses coconut fiber to yield "50 percent thicker grass with half the water," according to company claims. One of the most promising new grass seeds is Eco-Lawn, from Canada, which doesn't require any fertilization and can be planted over existing grass.

▶ **No grass—or faux grass** Ground covers like blue carpet juniper, wildflowers, and sprinkle-on moss don't require much water and need little tending. Another alternative is artificial turf, such as the recently introduced K9Grass, from ForeverLawn in Albuquerque, New Mexico, which boasts a porous backing for rain (and dog urine). Despite health concerns over lead levels in fake turf made from recycled tires—and its tendency to retain heat (it can get up to 60 degrees hotter than real grass)—cities such as Scottsdale, Arizona, are encouraging homeowners to go faux.

▶ **It's the soil** Manure was once the fertilizer of choice to beef up soil and feed grass. Today, organic landscapers advocate composting with lawn or kitchen scraps, mulching with grass clippings, or fertilizing with organic products that combine anything from llama manure to fish emulsion and alfalfa. Last year, Harvard eliminated chemical treatment on 25 acres of its greens; it now relies only on "basic soil health techniques," using natural

(DANDELION) GRANGER COLLECTION, NY; (GARDEN) GRANT FAINT/IMAGE BANK/GETTY IMAGES

THE TIME LINE



Dandelion: "lion's tooth" in Old French

1600s / Discarded bedding and manure dumped into East Coast ports by arriving settlers introduce grasses and weeds from Europe.

1661 / Louis XIV commissions the designs and layout of the gardens of Versailles; the work takes 40 years to complete. Lawns in England and France become dalliances of the superrich.

1780 / The Shakers produce top-quality grass seed.

1808 / Thomas Jefferson creates an English-style lawn at Monticello.



1868 / The first three patents for lawn mowers are issued.

1888 / The St. Andrews Club in Hastings-on-Hudson, New York, the oldest continuously operating golf club in the U.S., is founded.

1944 / The herbicide 2,4-D is introduced to the public to fight weeds; later used as one of the chief ingredients in Agent Orange.

1947 / Scotts Company sells first "weed-and-feed," making herbicide use as routine as the use of fertilizer.

1962 / Rachel Carson's *Silent Spring* condemns use of DDT on lawns.

1984 / U.S. applies more chemical

mulch and the "compost tea" brewed in giant vats on campus. In one year, by composting and recycling 500 tons of grass clippings, pruned branches, and leaves for mulch, the college saved two million gallons of water and $35,000 in disposal costs.

▶ **Rebates** Some states, even cash-strapped California, are offering cash incentives to people who shrink their lawns, limit watering during peak usage times, or use "smart water meters" that let homeowners monitor how much water they're using.

The Back-and-Forth ...

"Pretty much by definition, a lawn is unnatural." *Elizabeth Kolbert,* "Turf War," the *New Yorker*

"It's not the grass but the irrigation and the people who are managing it—or maybe not managing it—that's the problem." *Michael Dukes,* University of Florida

"In general, chemicals in the United States are innocent until proven guilty, while in Canada and the European Union, chemicals have to be considered safe first." *Paul Tukey,* founder, safelawns.org

fertilizer to lawns than India uses on all its crops.

1990 / Illinois bans the dumping of lawn clippings in landfills.

2000 / EPA demands a phaseout of diazinon sales by 2005, citing health concerns in humans.

2001 / Supreme Court of Canada rules that the nation's municipalities can restrict pesticide use on private as well as public land.

2002 / A report reveals traces of 37 pesticides were found in streams feeding a reservoir supplying some of New York City's drinking water.



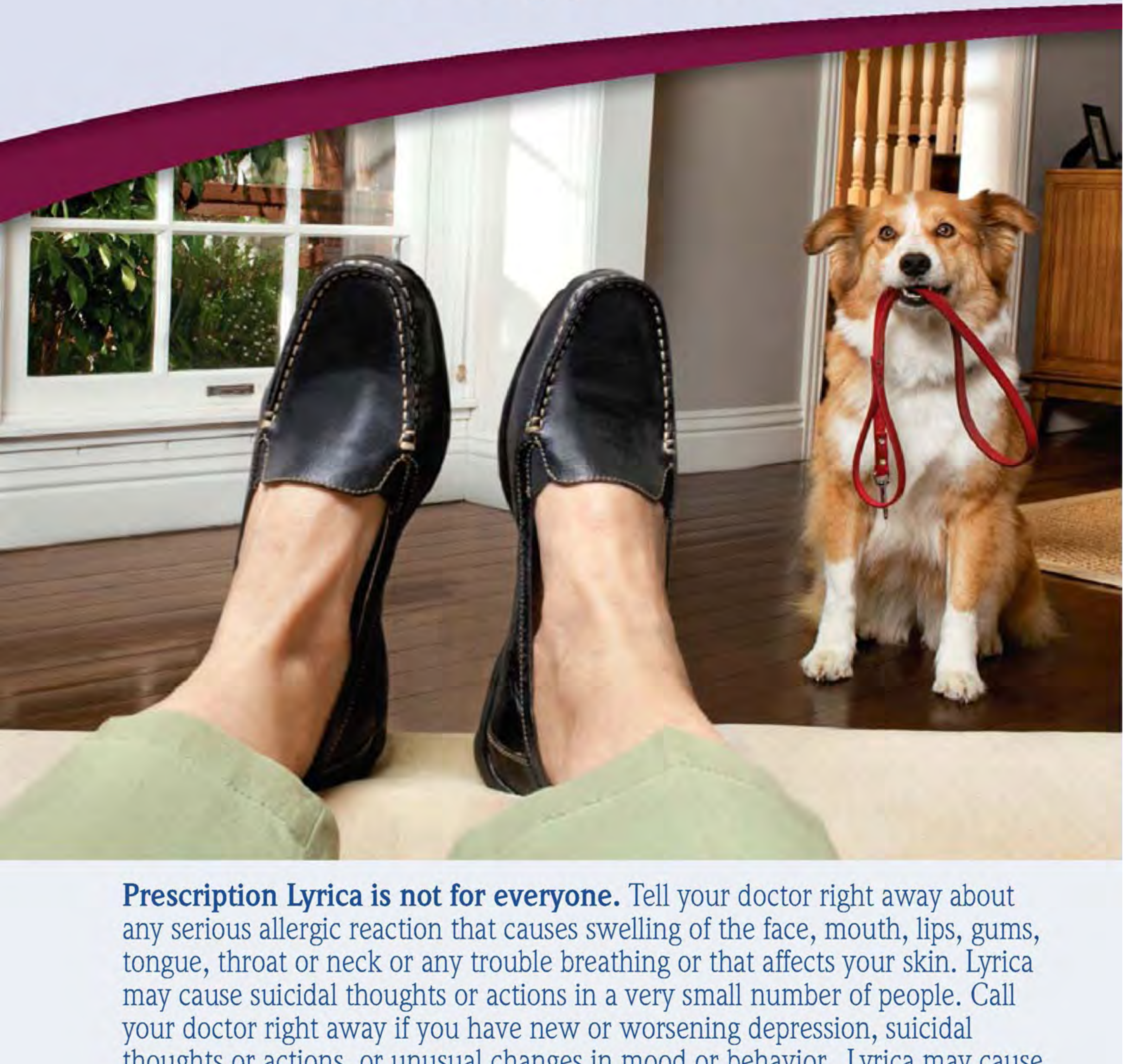


2007 / Connecticut bans pesticides on elementary- and middle-school grounds.

2009 / First Lady Michelle Obama turns part of the White House lawn into an organic vegetable garden.

(CARSON) ALFRED EISENSTAEDT/TIME & LIFE/GETTY IMAGES; (OBAMA) TIM SLOAN/AFP/GETTY IMAGES

Is **Diabetic Nerve Pain** holding you back?



Prescription Lyrica is not for everyone. Tell your doctor right away about any serious allergic reaction that causes swelling of the face, mouth, lips, gums, tongue, throat or neck or any trouble breathing or that affects your skin. Lyrica may cause suicidal thoughts or actions in a very small number of people. Call your doctor right away if you have new or worsening depression, suicidal thoughts or actions, or unusual changes in mood or behavior. Lyrica may cause swelling of your hands, legs and feet. Some of the most common side effects of Lyrica are dizziness and sleepiness. Do not drive or work with machines until you know how Lyrica affects you. Other common side effects are blurry vision, weight gain, trouble concentrating, dry mouth, and feeling "high." Also, tell your doctor right away about muscle pain along with feeling sick and feverish, or any changes in your eyesight including blurry vision or any skin sores if you have diabetes. You may have a higher chance of swelling, hives or gaining weight if

LYRICA®
PREGABALIN CV
capsules

Move towards relief with Lyrica.

Burning, throbbing symptoms in your hands or feet?
Lyrica is FDA approved to effectively treat Diabetic Nerve Pain.
Over-the-counter pain relief pills are not
FDA approved to treat this unique kind of pain.

Lyrica studies showed that patients had less Diabetic Nerve Pain and felt better.

Diabetes damages nerves *which may cause a unique type of pain.**



Lyrica *is believed to work on these damaged nerves.*

*Artist depiction of diabetic nerve pain symptoms

Start the Lyrica conversation with your doctor today.

you are also taking certain diabetes or high blood pressure medicines. Do not drink alcohol while taking Lyrica. You may have more dizziness and sleepiness if you take Lyrica with alcohol, narcotic pain medicines, or medicines for anxiety. If you have had a drug or alcohol problem, you may be more likely to misuse Lyrica. Tell your doctor if you are planning to father a child. Talk with your doctor before you stop taking Lyrica or any other prescription medication.

Please see Important Facts Brief Summary on adjacent pages.

To learn more visit www.lyrica.com or call toll-free 1-888-9-LYRICA (1-888-959-7422).

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.FDA.gov/medwatch or call 1-800-FDA-1088.

IMPORTANT FACTS

LYRICA PREGABALIN (LEER-i-kah)

IMPORTANT SAFETY INFORMATION ABOUT LYRICA

LYRICA may cause serious, even life threatening, allergic reactions.
Stop taking LYRICA and call your doctor right away if you have any signs of a serious allergic reaction:

- Swelling of your face, mouth, lips, gums, tongue, throat or neck
- Have any trouble breathing
- Rash, hives (raised bumps) or blisters

Like other antiepileptic drugs, LYRICA may cause suicidal thoughts or actions in a very small number of people, about 1 in 500.
Call your doctor right away if you have any symptoms, especially if they are new, worse or worry you, including:

- New or worsening depression
- Suicidal thoughts or actions
- Unusual changes in mood or behavior

Do not stop LYRICA without first talking with your doctor.
LYRICA may cause swelling of your hands, legs and feet.
This swelling can be a serious problem with people with heart problems.
LYRICA may cause dizziness or sleepiness.
Do not drive a car, work with machines, or do other dangerous things until you know how LYRICA affects you. Ask your doctor when it is okay to do these things.

ABOUT LYRICA

LYRICA is a prescription medicine used in adults 18 years and older to treat:

- Pain from damaged nerves that happens with diabetes or that follows healing of shingles
- Partial seizures when taken together with other seizure medicines
- Fibromyalgia (pain all over your body)

Who should NOT take LYRICA:

- Anyone who is allergic to anything in LYRICA

BEFORE STARTING LYRICA

Tell your doctor about all your medical conditions, including if you:

- Have had depression, mood problems or suicidal thoughts or behavior
- Have or had kidney problems or dialysis
- Have heart problems, including heart failure
- Have a bleeding problem or a low blood platelet count
- Have abused prescription medicines, street drugs or alcohol in the past
- Have ever had swelling of your face, mouth, tongue, lips, gums, neck, or throat (angioedema)
- Plan to father a child. It is not known if problems seen in animal studies can happen in humans.
- Are pregnant, plan to become pregnant or are breastfeeding.
  It is not known if LYRICA will harm your unborn baby. You and your doctor should decide whether you should take LYRICA or breast-feed, but not both.

Tell your doctor about all your medicines. Include over-the-counter medicines, vitamins, and herbal supplements. LYRICA and other medicines may affect each other causing side effects.
Especially tell your doctor if you take:

- Angiotensin converting enzyme (ACE) inhibitors. You may have a higher chance for swelling and hives.
- Avandia® (rosiglitazone)*, Avandamet® (rosiglitazone and metformin)* or Actos® (pioglitazone)** for diabetes. You may have a higher chance of weight gain or swelling of your hands or feet.

BEFORE STARTING LYRICA, continued

- Narcotic pain medicines (such as oxycodone), tranquilizers or medicines for anxiety (such as lorazepam). You may have a higher chance for dizziness and sleepiness.
- Any medicines that make you sleepy

POSSIBLE SIDE EFFECTS OF LYRICA

LYRICA may cause serious side effects, including:

- See "Important Safety Information About LYRICA."
- Muscle problems, pain, soreness or weakness along with feeling sick and fever
- Eyesight problems including blurry vision
- Weight gain. Weight gain may affect control of diabetes and can be serious for people with heart problems.
- Feeling "high"

If you have any of these symptoms, tell your doctor right away.

The most common side effects of LYRICA are:

- Dizziness
- Blurry vision
- Weight gain
- Sleepiness
- Trouble concentrating
- Swelling of hands and feet
- Dry mouth

If you have diabetes, you should pay extra attention to your skin while taking LYRICA and tell your doctor of any sores or skin problems.

HOW TO TAKE LYRICA

Do:

- Take LYRICA exactly as your doctor tells you. Your doctor will tell you how much to take and when to take it. Take LYRICA at the same times each day.
- Take LYRICA with or without food.

Don't:

- Drive a car or use machines if you feel dizzy or sleepy while taking LYRICA.
- Drink alcohol or use other medicines that make you sleepy while taking LYRICA.
- Change the dose or stop LYRICA suddenly. You may have headaches, nausea, diarrhea, or trouble sleeping if you stop taking LYRICA suddenly.
- Start any new medicines without first talking to your doctor.

NEED MORE INFORMATION?

- Ask your doctor or pharmacist. This is only a brief summary of important information.
- Go to **www.lyrica.com** or call **1-866-459-7422 (1-866-4LYRICA).**

PARKE–DAVIS, Division of Pfizer Inc., New York, NY 10017 **Rx only**

Version January 2010

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BEST of America

From the most benevolent boss to the tallest Great Dane, our annual celebration of the people, places, and ideas that make us great

Best Trekker

Lori Schneider knows a few things about fear. "We were crossing a ridge that dropped off 8,000 feet on both sides," says the 53-year-old climber of ascending Mount Everest last spring. "The wind was blowing at 60 miles an hour. If there was ever a moment to panic, this was it."

But she didn't. An hour later, she reached the peak—the last step in her personal challenge to scale the highest mountain on all seven continents.

Ten years earlier, she'd come face-to-face with a different type of fear, when the right side of her body went numb. After learning she had multiple sclerosis, she left her marriage, job, and home: "I ran from my whole life."

It was just before climbing South America's Mount Aconcagua in 2000 that she set her sights on the Seven Summits. After training by hauling 50-pound bags of dog food up the ski slopes near her Bayfield, Wisconsin, home, she topped Europe's Mount Elbrus in 2002, North America's McKinley in 2006, and Australia's Kosciuszko and Antarctica's Vinson Massif in 2008. She'd scaled Africa's Kilimanjaro in '93. That left Asia's Everest, the highest of all.

And there she stood, on a ridge at 28,800 feet. "When I trained, I told myself to take one step at a time by spelling out words," she says. "So I spelled out 'Don't let fear in.'" It got her to the top.

She's the first person with MS to conquer the Seven Summits. "From climbing, I've learned about courage—the courage to face your problems and move forward," she says. With her condition stable, she plans a return to Kilimanjaro in 2011—this time with 15 others with MS by her side.

PHOTOGRAPHED BY KEVIN J. MIYAZAKI/REDUX



Mountaineer
Lori Schneider

Best Impersonators

Names Ralph and Linda Archbold

Occupations Playing Ben Franklin and Betsy Ross at meetings and events in Philadelphia

Ages As Ralph and Linda, 68 and 52. As Ben and Betsy, 304 and 258.

How they met Linda hired Ralph in 2006 to entertain at the wedding of a friend, whose fiancé was a history buff.

How Linda became Betsy After the event, Ralph said to her, "I could use a Betsy Ross to escort me when I go on jobs. Would you be interested?"

Forming their historical union After a few gigs, the two started dating. One thing led to another, and on July 3, 2008, they said "I do" in front of hundreds outside Independence Hall. "It was so exciting!" Linda says. "No one is allowed to get married at Independence Hall, but city officials made an exception for us."

How often he dresses in britches and she dons a bonnet They average about 200 appearances a year and frequently perform together.

Skills required Memorizing historical trivia, riding on horseback, changing into bulky costumes in the back of a car.

How Ralph scored the youth vote While visiting relatives, he got a call from *The Colbert Report,* asking if he'd make a series of guest appearances on the show. "The teenagers thought it was very cool," Ralph says.

The lengths Linda will go After getting a haircut that was too short to accommodate the "hot dog" curls she wears with her costume, Linda needed hair extensions for a month.

Job perk They're never without plans for July Fourth.



(COUPLE) TOM MIHALEK/AP IMAGES; (SEAL) NHPA/PHOTOSHOT

READERS' CHOICE 2010

We asked 1,100 readers to vote for their favorite "only in America" oddities. Here we present the top three winners in each category. For the full list of nominees (and to suggest your own picks), go to **readersdigest.com/boa**.

Best Street Name

WINNER

Ez Street Westbrook, Connecticut

SECOND PLACE

Lois Lane Bowling Green, Kentucky

THIRD PLACE

Bad Dog Alley Waldorf, Maryland

BEST WILDLIFE WATCHDOGS

Beachgoers can be a menace to the monk seals of Oahu, Hawaii. Locals and visitors try to touch and photograph the adorable sea creatures; sometimes rowdy kids throw rocks. But monk seals are endangered—there are fewer than 1,100 left—and it's illegal to harass them. There aren't enough federal agents to manage the huge task of protecting them, so a group of citizens, worried that the seals could be wiped out within two generations, have stepped in.

The Hawaiian Monk Seal Response Team Oahu formed two years ago after a seal swam ashore to shed his annual coat, a process that can leave the animal immobile and vulnerable for up to a month. Donna Festa, a local real estate agent, happened to walk by and spot the seal, surrounded by beachgoers and dogs. "I wanted to keep him safe, but I knew I couldn't do it on my own," she says. "So I started talking to my neighbors." Pretty soon, she'd rounded up 15 people to take shifts guarding the seal from dawn to dusk.

The response team has since grown to 100 volunteers. When a mother seal galumphs ashore to give birth, members of the group are on the scene to keep the curious at bay. When a seal needs medical attention, someone calls for help. Thanks to the team's lobbying efforts, in 2008 the seal became Hawaii's official state mammal.

> "These seals have sweet souls."
> ***Barbara Billand,*** **volunteer**

Volunteer Barbara Billand, 61, often hits the beach at 7 a.m. "The seals touch your heart," she says. (But don't touch them.)



BEST GRIEF THERAPY

In Park City, Utah, during a numbing seven-month period in 2008, five young people lost their lives: Michael Pennels stopped breathing in his sleep, Connie Blount and Matt Knoop were killed by drunk drivers and Erica Knell in a car accident, and Chris Yeates fell to his death while hiking. They ranged in age from 17 to 20.



Erica Knell's mother, Ellen, sent each of the other kids' mothers a letter and an idea: She wanted to build a school in the children's honor, in a place where a new school would make a big difference. "I needed to throw my heart and soul into something," Knell says.

The moms immediately signed on. They chose two impoverished villages in the Andes mountains of Ecuador, where the rugged terrain is similar to that of Park City.

Hundreds of townspeople and dozens of businesses donated to the construction fund. A local elementary school raised money for new textbooks. The 5K for 5Kids run/walk drew a thousand participants.

And in July 2009, 47 adults and students from Park City flew to Ecuador to build the school. A painting of the five kids hangs in one room. "We were determined that our kids would not be forgotten," says Knell. Now the families plan to erect four more schools—one in memory of each child.

READERS' CHOICE

Best Offbeat Holiday

WINNER **National Goof-off Day** March 22
SECOND **Ask a Stupid Question Day** Sept. 28
THIRD **National Nothing Day** Jan. 16

Best Quartet

What do soldiers do after they leave the service? If they can sing, maybe they form a group, make a CD, and perform on U.S. Army bases to inspire other soldiers. At least that's what the members of 4TROOPS did. Retired Staff Sgt. Ron Henry, 41, former Capt. Meredith Melcher, 29, and former Sgts. Daniel Jens, 36, and David Clemo, 31—all of whom served multiple tours in Iraq or Afghanistan—sing a mix of pop and country, including "Here We've Been," with its opening lines "Raised my hand/ Raised my weapon/ Now I raise my voice." The vocalists, whose album was released by Sony Masterworks in April, are touring military bases around the country and will donate a portion of proceeds from the sale of their CD to veterans' charities. "We hope our music will help bridge the gap between the armed forces and the rest of America," Henry says.



PHOTOGRAPHED BY RUDY ARCHULETA/REDUX



"We want to be a source of hope for the troops."

Ron Henry, retired staff sergeant

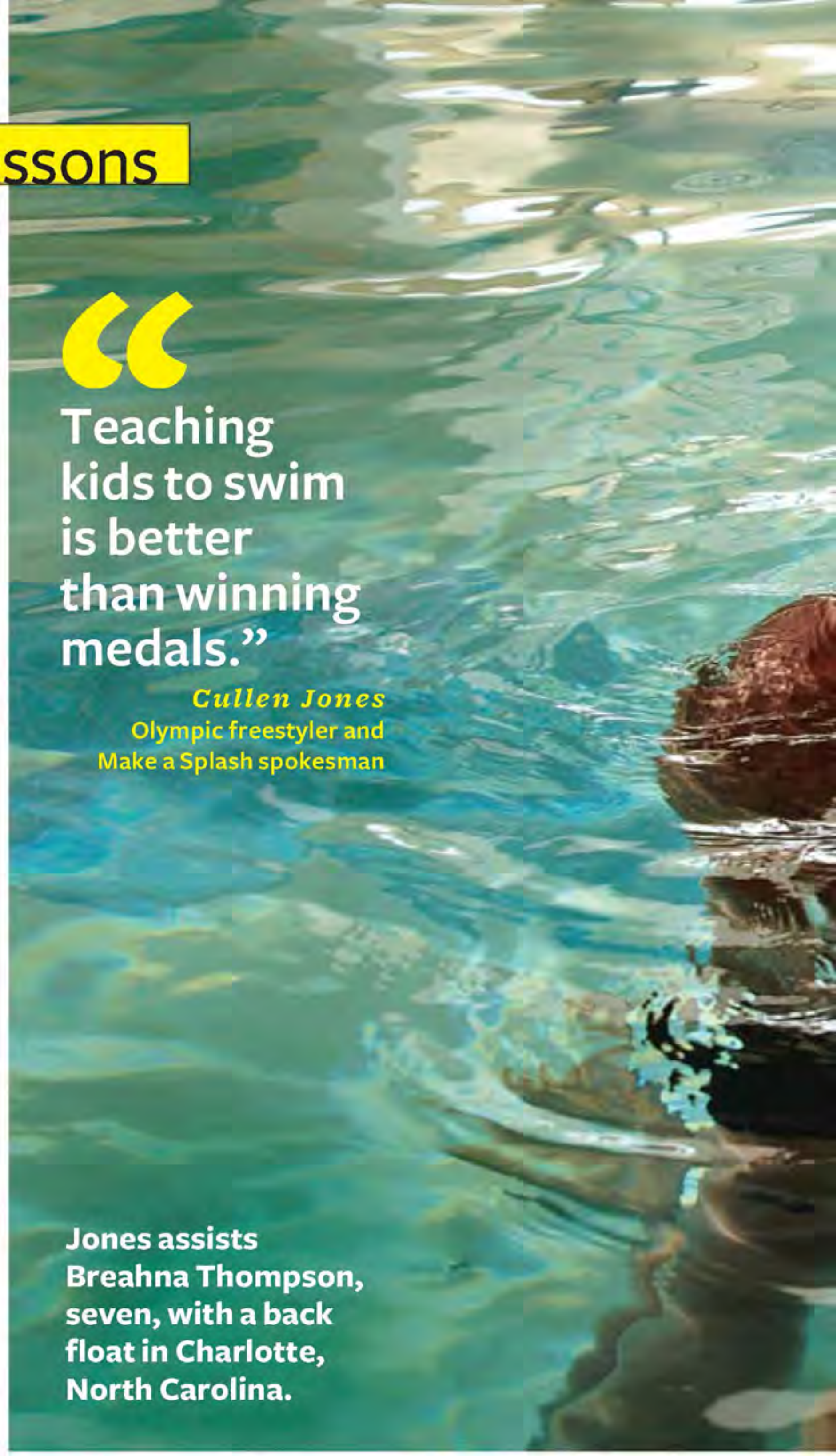
Singing soldiers (left to right): Jens, Melcher, Henry, and Clemo. Watch their video at readersdigest.com/boa.

Best Swimming Lessons

African American and Hispanic children drown at a rate three times higher than the national average. Nearly sixty percent—double the rate for white kids—can't swim at all. Research shows they're less likely to have parents and grandparents who can swim, to have access to a pool, and to feel comfortable in the water.

In an effort to change those stats, the USA Swimming Foundation's Make a Splash program offers free or low-cost lessons to minority children. Olympic gold medalist Cullen Jones, 26, the program's spokesman, tours the country speaking to kids in urban neighborhoods. He tells them how, as a five-year-old from the inner city, he nearly drowned at an amusement park. His mother immediately enrolled him in swimming lessons.

The program has taught more than 214,000 kids across the country to swim. "Tons of parents have said to me, 'Because of you, my child can swim and loves it,'" Jones says. "That's what we want to hear."



"Teaching kids to swim is better than winning medals."

Cullen Jones
Olympic freestyler and Make a Splash spokesman

Jones assists Breahna Thompson, seven, with a back float in Charlotte, North Carolina.

BEST HOME STORE



Fran Heitzman was working as a custodian at Pax Christi Church in Eden Prairie, Minnesota, one day when a woman came by to ask where she could donate a used crib. Heitzman called Catholic Charities, which quickly found a home for the crib, giving him an idea: Why not create a more direct route to supply furniture to those who can't afford it?

Bridging, Inc., founded by Heitzman, 85, is now the country's largest charity providing new and gently used household goods to the poor. Regular folks as well as huge retailers like Target and Walmart

ILLUSTRATION BY THOMAS FUCHS



donate furniture, appliances, and linens. Clients must be referred by agencies that serve the needy, and everything is free. In the charity's 23 years, 52,000 families have toured its two showrooms in Bloomington and Roseville to select what they need.

Their gratitude is Heitzman's motivation. "One woman told me, 'You have given me back my dignity,'" he says.

READERS' CHOICE

Best Roadside Attraction

WINNER

The **40-foot-long covered wagon** in Lincoln, Illinois

SECOND

The **12-foot-high ball of twine** in Cawker City, Kansas

THIRD

The **46-foot-long steel and stucco buffalo** in Jamestown, North Dakota

PHOTOGRAPHED BY ADAM TAYLOR

Best Big Dog

Name Giant George
Age 4
Breed Great Dane
Hometown
Tucson, Arizona
Claim to fame Holds Guinness world records for Tallest Dog Living and Tallest Dog Ever
Height 43 inches from paw to shoulder
Length 7 feet 3 inches from nose to tail
Weight 245 pounds
As a puppy "He looked so cute in his crate," says owner Dave Nasser.
Now "He kind of looks like a pony when he's running."
What he eats
110 pounds of dry food a month, from a dish elevated 20 inches off the ground
Where he sleeps
On a queen-size mattress made for humans
Transportation
Rides around the neighborhood in a golf cart with Nasser. "Sometimes it's hard to get him out."
Favorite game
Tug-of-war (guess who always wins)
Social networking
With more than 42,000 fans, George may be the most popular dog on Facebook.



PHOTOGRAPHED BY TOM SPITZ


“People tell me, ‘Get a saddle for that thing!’”
Dave Nasser
George’s owner



Best Dream Team

The only high schoolers competing for the $10 million Progressive Automotive X PRIZE are 20 teenagers from the West Philadelphia Academy of Automotive and Mechanical Engineering (six are shown here with three advisers). Their challenge: design an affordable vehicle that gets 100 miles per gallon and can be mass-produced. Having already outlasted teams from MIT and Toyota, they'll compete in races to decide the winners this summer. Says senior Azeem Hill, "We're doing something big for the world."

BEST BLOGS

We searched the blogosphere to find American voices that make us laugh:



■ **ANDY BOROWITZ** "A new social network is about to alter the social-media world, and it's called PhoneBook, a game changer that will leave Facebook and Twitter in the dust. With PhoneBook, you have a book that lists all your friends in the city, plus everyone else who lives there. When you want to chat with a friend, you look him up in PhoneBook, find his phone number, and it connects you directly to him!" **borowitzreport.com**

■ **JENNIFER WORICK** "Increasingly, when I enter someone's home, I'm shoehorned into a foyer lined with shoes and instructed to add mine to the pile. I get that folks don't want their hardwoods

ILLUSTRATION BY THOMAS FUCHS

BofA

BEST IRRESISTIBLE ICE CREAM FLAVORS

Who doesn't love ice cream? What we love even more: the creative geniuses across the country who keep inventing crazy new flavors to tempt (or shock) our taste buds.

FLAVOR	WHERE TO GET IT	WHAT'S IN IT
Cold Sweat	Sunni Sky's Homemade Ice Cream Angier, North Carolina	Ice cream base, hot sauces, and pequín, habanero, and Thai chili peppers (store owners ask you to sign a waiver before you eat this!)
Bacon	The Ice Cream Store Rehoboth Beach, Delaware	African vanilla ice cream with bacon bits
Guinness	Amy's Ice Creams Austin, Houston, and San Antonio, Texas	Amy's sweet-cream mix with Guinness beer
Lobster	Ben & Bill's Chocolate Emporium Bar Harbor, Maine	Butter-flavored ice cream with lobster chunks
Akutaq	Throughout Alaska	Whipped animal fat, berries, sugar, and boiled fish
Mexican Chocolate	Cafe Pasqual's Santa Fe, New Mexico	Chocolate ice cream, Kahlúa, chile pequín flakes, cinnamon, almonds, and instant coffee
Breakfast Bash	Max & Mina's Homemade Ice Cream Queens, New York	Maple-walnut ice cream, pancake and French toast pieces, confectioners' sugar

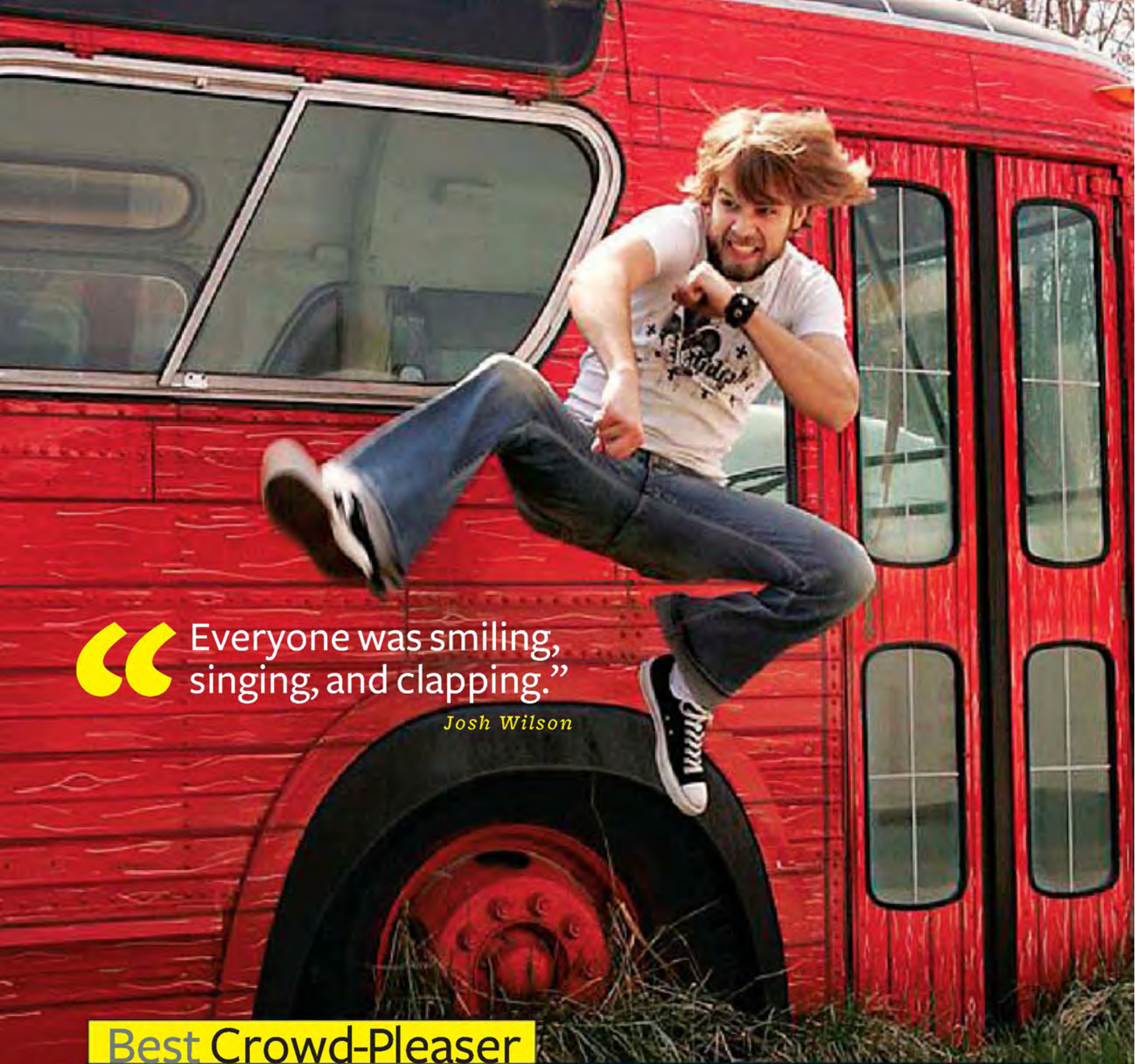


(DREAM TEAM) TIM SHAFFER/REUTERS

scratched and scuffed. Call me a heel, but I don't want to walk around a party in my socks." **thingsiwanttopunchintheface.blogspot.com**

■ **REE DRUMMOND** "I attended college in Los Angeles and wore black pumps to work every day. I ate sushi and treated myself to pedicures. Then I fell in love with a rugged cattle rancher. Now I live in the middle of nowhere and spend my days wrangling children and washing jeans. I have no idea how I got here ... but you know what? I love it. *Don't tell anyone.*" **thepioneerwoman.com**

■ **LENORE SKENAZY** "The American Academy of Pediatrics wants companies to start labeling hot dogs, carrots, and grapes as choking hazards. Which, admittedly, they are. And sidewalks are tripping hazards, and puddles are slipping hazards, and trees are bumping-into hazards." **freerangekids.wordpress.com**



> “Everyone was smiling, singing, and clapping.”
>
> *Josh Wilson*

Best Crowd-Pleaser

Tempers were short. Voices were shrill. It was starting to get ugly in Terminal C at Newark’s Liberty International Airport, where a security breach had travelers locked down for six hours on January 3. “Looking around, you could see the frustration on everyone’s face,” says 26-year-old Josh Wilson, who was stuck on his way to Mumbai, India. A singer-songwriter whose latest album, *Life Is Not a Snapshot,* was released in September, Wilson felt he had to act.

When he began to strum the opening bars of the Beatles song “Hey Jude” on his guitar, heads turned. By the first chorus, faces relaxed. Some travelers started singing along, softly at first. “By the time we hit the ‘na-na-na-nas,’” he says, “just about every passenger had joined in.” The planes didn’t get off the runway any faster, but Wilson’s music lightened a moment. “I wanted to ‘take a sad song and make it better,’” he says, “just like it says in the lyrics.”

BEST WORKOUT



A little green emerged this year in a run-down Detroit neighborhood. Inside a cinder block building, a ribbon was cut in the freshly painted workout room of the Green Gym, and people began spinning on ten stationary bikes that convert pedal power into electricity, generating energy for the gym and lowering its costs. What makes the place even more striking: Built by Cass Community Social Services, it serves more than 200 homeless people. Says Rev. Faith Fowler, the executive director, "This gives a population that otherwise wouldn't have access to a gym a chance to make a difference not only to their health but also to the planet."

READERS' CHOICE

Best License Plate Slogan

WINNER
Utah
Life Elevated

SECOND
Idaho
Potatoes

THIRD
New Mexico
Land of Enchantment

BEST BALLPARK FOOD

The only thing that rivals Kevin O'Connell and Josh Pahigian's love of baseball is their love of food. While researching their book *The Ultimate Baseball Road-Trip*, they cheered teams and chowed down at all 30 of America's major-league baseball stadiums. Their top five concession-stand picks are worth the long lines:

THE SHACKBURGER
Citi Field, New York Mets
"A real burger—juicy beef with cheese, lettuce, a thick slice of tomato, and tangy sauce on a soft bun. The only problem is, it's so popular you might have to wait two innings to get one."

BEN'S ORIGINAL CHILI HALF-SMOKE "ALL THE WAY"
Nationals Park, Washington Nationals
"The chili is not super-hot but has a nice zing to it. Get it however you like it: on a dog, on a burger, over fries, or in a bowl."

BARBECUE BAKER
Minute Maid Park, Houston Astros
"A baked potato with cheese, pulled pork, barbecue sauce, onions, and jalapeño peppers—an ingenious combination that's so big, you have to use both hands."

SHRIMP TACOS
PETCO Park, San Diego Padres
"A light but satisfying taco made with nicely spiced shrimp and wrapped in a soft shell. Be sure to order it with garlic sauce, cabbage, and salsa."



THE SHACKBURGER

MILLER'S DOG
McAfee Coliseum, Oakland A's
"Bigger than your average dog, grilled to perfection, with a good, salty taste. We haven't met its equal."

ILLUSTRATION BY THOMAS FUCHS; (BURGER) WILLIAM BRINSON

GOOD NEWS FILE

- Amount Americans donated, via texting, to the Haiti relief efforts after the January earthquake: **$43 million**
- Percentage of improvement in air quality nationwide from 1990 to 2008: **41**
- Percentage of 18- to 24-year-olds enrolled in college (a record high): **40**
- Percentage of eighth graders who scored at or above grade level on standardized math tests in 2009 (the highest ever): **73**
- Number of bicycles 18-year-old Matthew Lee has fixed up and donated to foster children in the Seattle area since 2006: **400**
- Percentage decrease in the violent crime rate from 1999 to 2008 (it's now the lowest since 1973): **13**
- Percentage decrease in U.S. traffic deaths from 2008 to 2009 (it's now the lowest since 1954): **9**
- Percentage of paper recycled in the U.S. last year (the highest ever): **63**
- Amount Americans donated to the Salvation Army Red Kettle campaign in 2009 (the most ever): **$139 million**

READERS' CHOICE

Best President with a Little-Known Talent

WINNER

Jimmy Carter, who could read 2,000 words per minute

SECOND

James A. Garfield, who could write with both hands at once

THIRD

Gerald Ford, who once worked as a fashion model

Best Anti-Ponzi Scheme

When Marilyn Forbes, a retired secretary, first heard the name Bernie Madoff, the Wall Street financier now serving a 150-year prison sentence for stealing $65 billion from his investors, she had no idea who he was.

"I saw it on the news and thought, Oh, those poor people, without realizing that I was one of them," says Forbes, 73.

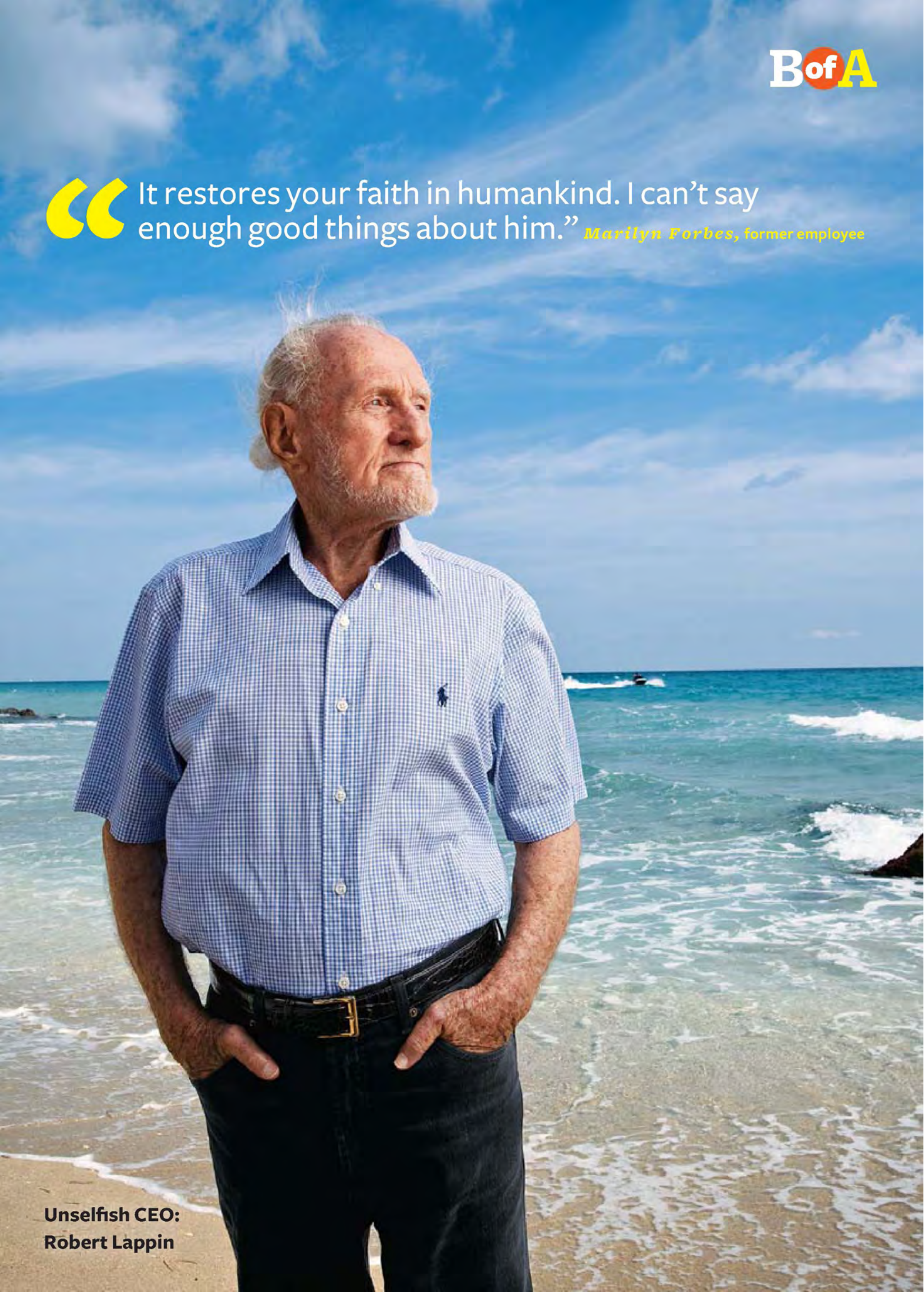
But Robert Lappin, her former boss and the CEO of Shetland Properties, who made his money building and managing industrial parks in the Boston area, understood the implications right away—for Forbes and his other 59 former and current employees. Their retirement plans, as well as the Lappin charitable foundations' assets and much of Lappin's personal fortune, had been invested with Madoff. And all of it—more than $83 million—was now gone.

"I was in shock," recalls the ponytailed Lappin, 88. But instead of worrying about his personal losses, which totaled $18 million, he looked for a way to restore his employees' retirement funds. Six months later, Lappin—with the help of his three children, who had not invested heavily with Madoff—wrote checks to his employees for $5.1 million.

Lappin had a good model in his father, who never evicted anyone from the apartment buildings he owned during the Great Depression, even tenants who were weeks behind on their rent. He cites another reason: "It had a great deal to do with sleep," he says. "I had to do this, or I would not have been able to sleep well for the rest of my life."

PHOTOGRAPHED BY JASON GROW

“It restores your faith in humankind. I can’t say enough good things about him.” *Marilyn Forbes,* former employee



Unselfish CEO: Robert Lappin



Picture frames form a ceiling; old shingles make a striped roof.

BEST MATH TOOL



Abraham Nemeth loved his high school math classes. But born blind, he couldn't read the textbooks—at the time, there was no Braille code for numerical equations. His guidance counselor suggested he study psychology instead.

After he graduated from college and grad school, though, his handicap made it difficult for him to find a job in his chosen field. "My wife told me maybe I'd be happier as an unemployed mathematician than as an unemployed psychologist," he says.

ILLUSTRATION BY THOMAS FUCHS



"Throwing materials away is a bit piggy when so many don't have a decent place to live."

Dan Phillips

Best Recycler

A well-dressed man rummaging through a Dumpster would ordinarily make onlookers wonder. But if it's Dan Phillips going through the garbage, people in Huntsville, Texas, understand. He's about to build another house.

"The average landfill contains what I'd consider 40 percent usable building supplies," says Phillips, 65. "In our city, we were burying enough materials to build a small-scale home every week."

Twelve years ago, the former dance instructor, Army translator, and puzzle maker formed Phoenix Commotion, Inc., a for-profit construction company that builds low-income housing with at least 80 percent recycled materials—and a lot of creativity.

Phillips has shingled a roof with cast-off license plates, made a floor out of wine bottle corks, and turned tree branches into doorknobs. He's built 12 homes that range in size from a 350-square-foot one-bedroom to a 1,000-square-foot four-bedroom. Cost to own: $199 to $450 a month.

"Giving people a place to call their own gives them a stake in the community," he says. And if he takes a few Dumpster dives along the way, that's worth it.

So Nemeth returned to school as a doctoral student in mathematics with an emphasis in topology—and improvised a method for capturing equations as he listened to lectures. Today, the Nemeth Code is a universal math and science writing system for the blind.

But why stop there? At age 91, retired but still hard at work, he has invented the Nemeth Uniform Braille System. Currently under review, the system could standardize Braille codes across academic disciplines for the first time in the United States. "I'm living proof that it's better to light a candle than to curse the darkness," he says.

MICHAEL STRAVATO/NEW YORK TIMES/REDUX



Best Road Trip

Tyler Kellogg calls himself a chronic do-gooder, and what he did last summer is proof: After scraping together $2,000 and retrofitting his car with a sleeping space, the 21-year-old college student hit the road. His goal: to bestow random acts of kindness on 100 strangers.

He drove 1,600 miles, from his parents' house in Adams Center, New York, to the Florida Keys, then back again. "The first person I helped was a guy installing a boat lift on a lake in Oneida, New York," Kellogg recalls. "I was shaking when I asked if he needed a hand." What if he thought Kellogg was crazy? "When he said, 'Can you help me get this lift into the water?' I knew everything was going to be fine."

He helped a cop fix a downed barricade in Washington, D.C., and spread countless cubic yards of mulch in Maryland and North Carolina. And somewhere outside Atlanta, he met a man who was crying because his wife had recently died and he had no one to talk to. "For three hours we sat on his porch," Kellogg says. "When I left, he said, 'Thank you. I realize now that my life will go on.' "

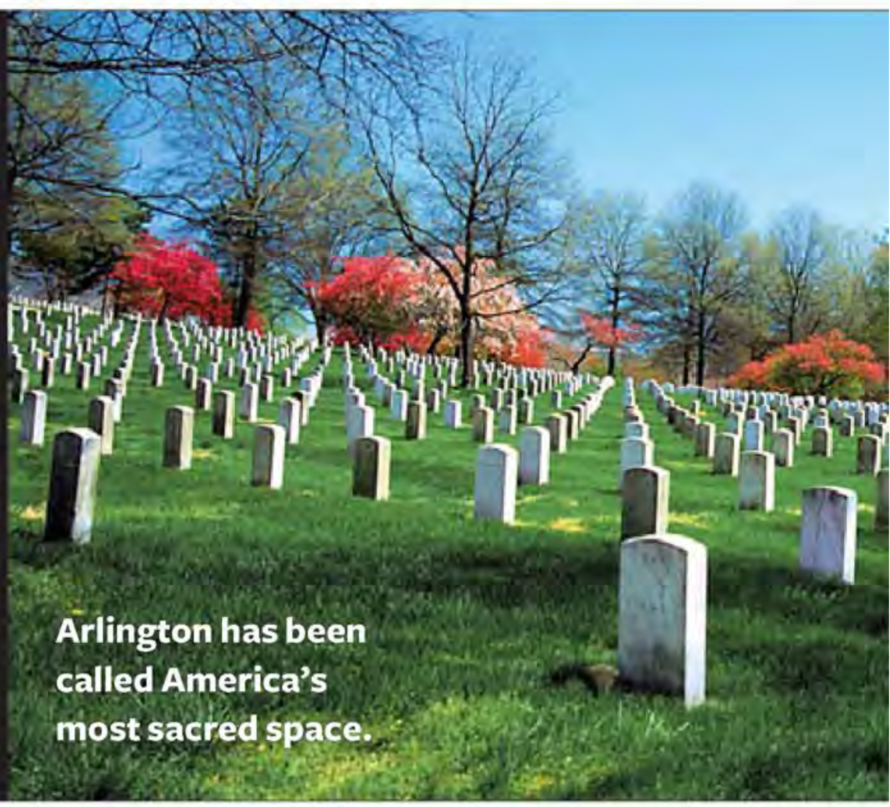
In 55 days, Kellogg assisted 115 strangers and made an exhilarating realization: "You don't have to be a billionaire to be a philanthropist," he says. "You just have to ask people, 'How can I help?' "

NORM JOHNSTON/WATERTOWN DAILY TIMES

BEST LAWN GUYS

Phil Fogarty is a landscaper in Cleveland. For one day every July, he also helps tend one of the most important expanses of green in America: the one in Arlington National Cemetery, where 25 to 30 veterans are laid to rest every day.

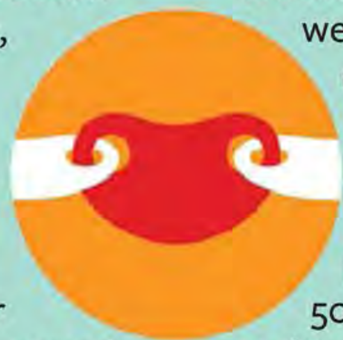
As part of a volunteer effort called Renewal & Remembrance, Fogarty and 400 other volunteers travel to Virginia at their own expense and donate $250,000 worth of labor, equipment, and materials to lime lawns, yank weeds, feed flowers, and plant trees.



Arlington has been called America's most sacred space.

BEST CHAIN REACTION

When Pamela Hull heard that her cousin, Christopher Conte, would die without a new kidney, she offered to give him one. Kelvina Hudgens made the same offer to her mom, Meta Hudgens. But neither donor was a match. The same was true for 11 other patients and their potential donors around the country, some of whom had been waiting to give or receive kidneys for years.



Last December, in a record-breaking medical feat, surgeon Keith Melancon arranged a kidney swap among 26 people—13 in dire need of transplants and 13 others eager to donate.

For six days, Melancon oversaw dozens of doctors and nurses at Georgetown University Hospital and Washington Hospital Center in Washington, D.C.: "Kidneys were shipped from one center to the other, crisscrossing the city at the same time."

Afterward, Christopher, 49, and Meta, 50, had new kidneys, and Pamela, 49, and Kelvina, 30, had given theirs to others.

Now, for the first time in years, Meta can take a walk without stopping every few paces to rest. She stays in touch with Pamela, her donor. "We were total strangers," Pamela says. "Then all of a sudden, there's a forever connection."

ILLUSTRATION BY THOMAS FUCHS

READERS' CHOICE

Best U.S. Patent

WINNER
Alarm Fork
Times you between bites so you don't eat too fast

SECOND
Putt 'n' Reel
Lets you putt, then use the fishing-line feature to reel in your golf ball

THIRD
Beerbrella
Keeps the sun off your beer



TERRY WHY/PHOTOLIBRARY/GETTY IMAGES

Their work helps support the year-round efforts of Arlington's staff to maintain the cemetery's 624 acres. Says Fogarty, "It's our gift to America."

He also helped launch GreenCare for Troops, a nationwide program that supplies free lawn care to military families while a loved one is deployed overseas. Since 2006, the program has provided more than 9,000 households with more than 2,500 green-thumbed volunteers. "Tending a lawn is nothing compared with what these families go through," says Fogarty. "But it's a way to let them know we care."

BEST FESTIVALS

America loves a party. We found enough funky festivals and eccentric events across the country to fill a lifetime with fun. Among our favorites:

OSTRICH FESTIVAL
Chandler, Arizona

At this annual bash celebrating the southern Arizona tradition of ostrich ranching, revelers can cheer on their preferred bird during a 50-minute ostrich race and then down an ostrich burger—presumably one not made of the losers.

WORLD CHAMPIONSHIP PUNKIN CHUNKIN
Bridgeville, Delaware

How far can you chunk a pumpkin? Each November, competitors in this contest use catapults, centrifugal spinners, and other homemade contraptions to launch an eight- to ten-pound pumpkin as far as mechanically possible. The record: 4,483.51 feet.

KINETIC SCULPTURE RACE
Baltimore, Maryland

Is it art—or transportation? Both, it turns out, when human-powered sculptures cross sea, mud, and sand in an eight-hour, 15-mile race along the city's Inner Harbor each May. Past award winners have included two Elvis impersonators in a car nicknamed Hunk a Hunk of Burnin' Junk.

SPUTNIKFEST
Manitowoc, Wisconsin

In September 1962, a chunk of glowing debris from *Sputnik 4*—one of the first Earth-orbiting satellites, launched by the Soviet Union—fell from the sky onto a street in downtown Manitowoc. The Russians reclaimed the piece, but the town hosts an annual festival to commemorate its arrival. Highlights: a Miss Space Debris contest—costumes made out of aluminum foil are common—and an Artta This World art fair.

FROZEN DEAD GUY DAYS
Nederland, Colorado

When Grandpa Bredo Morstoel died in 1989, his cryogenically minded family packed him in dry ice and placed him in a shed to await a cure for death. This annual March party honors him with a hearse parade, kid coffin races, and frozen turkey bowling.



The Ostrich Festival draws a crowd of 200,000 each March.

COURTESY CHANDLER CHAMBER OF COMMERCE

Best Town Names

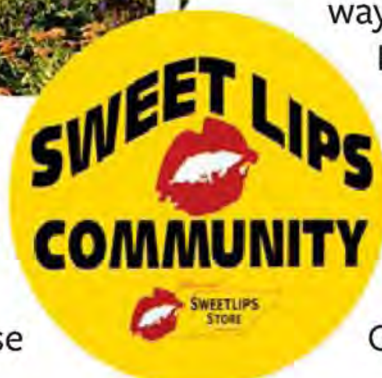
We sent our humor editor, Andy Simmons, on a cross-country trip. His report:











"I was holed up in **Boring**, Oregon, wondering whether I should try someplace different. So I hopped in my car and drove to **Why**, Arizona, to figure things out. After a few days I found my answer in **Whynot**, Mississippi: I needed a town with some life to it. I made a beeline for **Disco**, Tennessee, where I danced so much, I wore out my shoes. The next day, I headed to **Loafers Glory**, North Carolina, for a new pair. Afterward I looked sharp enough to take a break in **Handsome Eddy**, New York. Eddy wasn't around, but I knew where to find him—in **Loveladies**, New Jersey, where it seemed that all the women were trying to get to **Husband**, Pennsylvania. It was a tough town. One gal told me my romancing needed work and sent me to **Sweet Lips**, Tennessee. Heartbroken, I put the car on cruise control and drove to **Lonelyville**, New York, for a stiff drink. I made a pit stop in **The Bottle**, Alabama, and finally hit rock bottom in **Condemned Bar**, California. Not surprisingly, I woke up the next morning in **Cranky Corner**, Louisiana. I knew that if I continued like this, I'd be headed straight to ... **Hell**, Michigan. Pulling myself together, I grabbed breakfast in **Oatmeal**, Texas, lunch in **Sandwich**, Massachusetts, and dessert in **Pie Town**, New Mexico. I should've stopped eating after **Greasy**, Oklahoma, because I was feeling pretty sick by the time I left **Lick Skillet**, Tennessee. In **Brilliant**, Ohio, it finally dawned on me—I had to cease my wandering ways. I parked in **Do Stop**, Kentucky, took out the map, and chose my new home. I didn't need **Wealthy**, Texas, or **Fame**, West Virginia. I found everything I needed in **Happyland**, Oklahoma."

CHARLES GULLUNG/PHOTONICA/GETTY IMAGES; OHIO DEPT. OF TRANSPORTATION; JOSEPH SOHN/VISIONS OF AMERICA/CORBIS; COURTESY LOVELADIES-NJ.COM; COURTESY SOUTHWEST TN ASSOCIATION

READERS' CHOICE

Best Weirdly Popular Baby Names

Girls

WINNER Sadie
SECOND (tie) Astrid, Harper
THIRD Flannery

Boys

WINNER Zane
SECOND Quincy
THIRD Silas

CONTRIBUTING WRITERS:
Joseph Braude, Jim Collins, Joseph D'Agnese, Rosie Mestel, Kenneth Miller, Ronnie Polaneczky, Jeff Rennicke, Joe Rhodes, Andy Simmons, and Natalie van der Meer

7 HOME HEALTH CHECKS THAT CAN SAVE YOUR LIFE

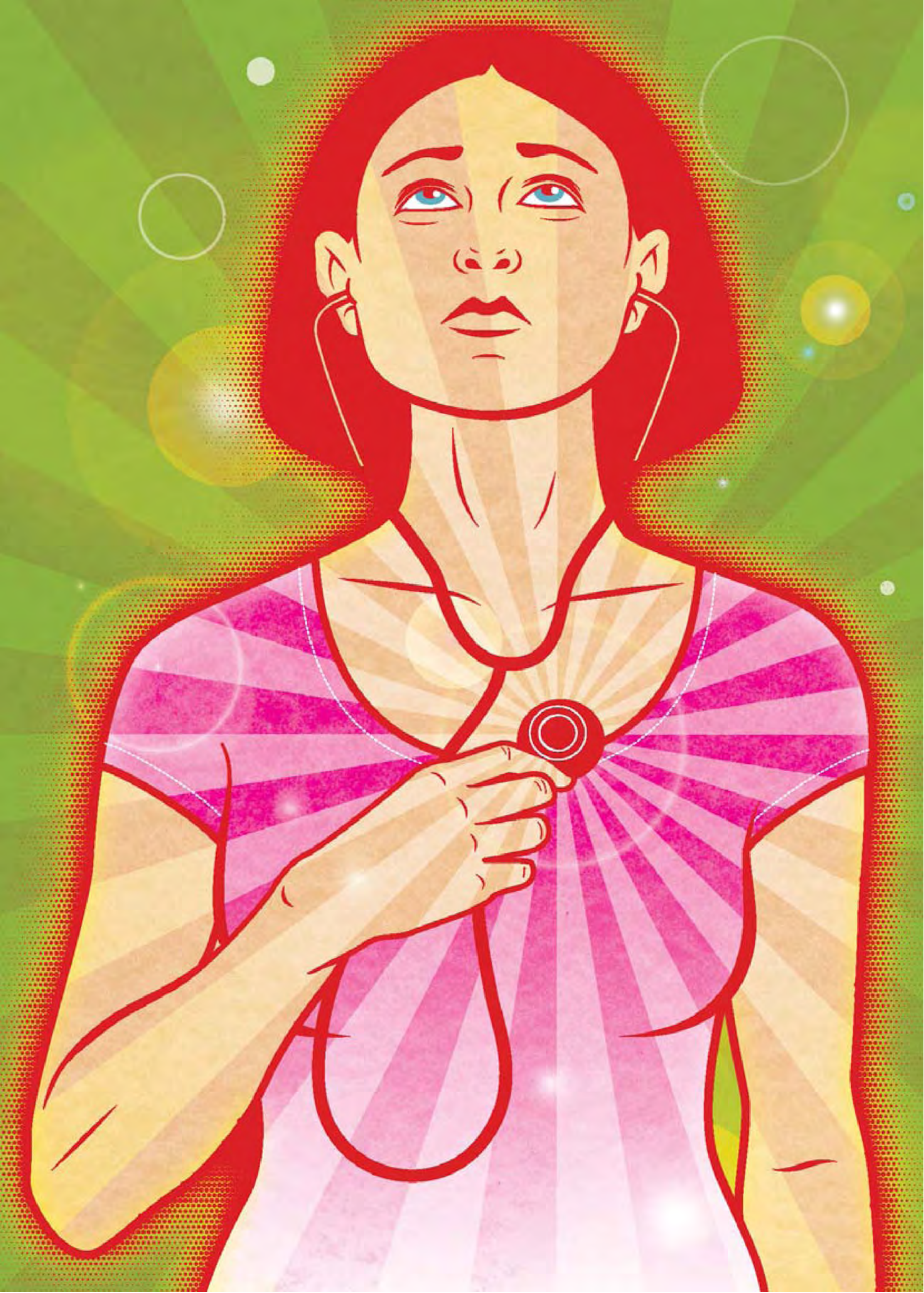
They're fast, do-it-yourself, and easy

BY SARI HARRAR

Most human hearts pound out a steady beat: *lub-DUB-lub-DUB*. Not Jason Mattingly's. From the time he was a teenager, his ticker would often race with the rapid-fire cadence of a machine gun, thumping chaotically like an out-of-sync high school drill squad and pounding so hard, it kept him awake nights.

"I always knew something wasn't right with my pulse—the rhythms just weren't normal," says Mattingly, 37. A few years ago, the security-technology salesman finally learned why: Tests revealed a heart rhythm irregularity called atrial fibrillation, which raises the risk of having a stroke fivefold. Mattingly, who lives in Frisco, Texas, with his wife and three children, eventually decided to have a procedure to fix the problem. "Here I was, a husband and the father of young

ILLUSTRATED BY MCKIBILLO



children. I didn't want to be worried about having a stroke," he says. "Now I don't have to."

Mary Hendershot of Grand Rapids, Michigan, was a sprinter for her high school track team. "If I ran longer distances, my lungs gave out before my legs did," she says. "I was so breathless." Several years ago, when her son was diagnosed with asthma, Hendershot decided to report her own breathing problems to the doctor. "He gave me an inhaler to try. As soon as the weather warmed up, I put on my sneakers, used the inhaler, and started running," says Hendershot, 30, a database administrator at a utility company. "I ran a quarter of a mile, and for the first time in my life, I could keep on going. I ran around the local park. I ran back home. I ran at least a mile. I just kept thinking, This is amazing. It was asthma, but I never knew it!"

We hear a lot about robot-assisted brain surgery, experimental microchips that may reverse blindness, mice grown from stem cells, and other dazzling, high-tech medical breakthroughs. It's easy to miss the fact that a few do-it-yourself checks—so low-tech they barely seem like tests at all—have the power to save your life. These research-proven, expert-endorsed self-exams cost nothing, but the payoff may be enormous. Here are seven tests doctors hope you'll take—today.

1 DO A WHEEZE CHECK

Untreated asthma leads to 1.8 million ER visits and 4,000 deaths a year.

Asthma can make exercising a struggle and everyday activities a challenge. But it's often overlooked, especially in adults. In one recent study of more than 4,000 African American men and women, 10 percent had signs of undiagnosed asthma. Experts say that about the same proportion of people over age 65 have the disease without knowing it. "You may think you're just having breathing problems because you're getting older," says researcher Paul Enright, MD, of the University of Arizona. "But don't downplay it. Undiagnosed asthma can make life more difficult and could even be deadly."

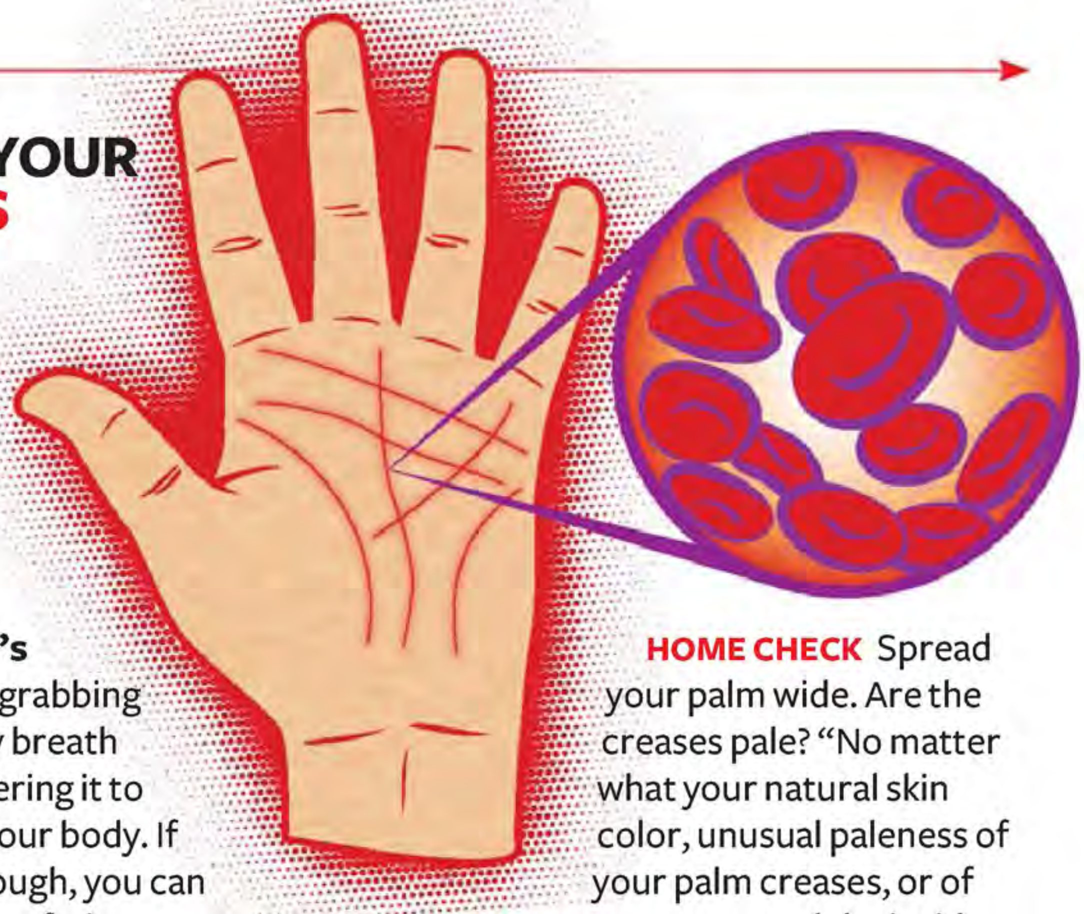
HOME CHECK Ask yourself these two questions used to assess respiratory health in a pair of studies involving nearly 27,000 people. The questions are simple, but they can identify 90 percent of people with asthma:

1. Do you wheeze sometimes?
2. Do you experience shortness of breath while you're exercising or exerting yourself?

YOUR NEXT STEP If you answered yes to one or both questions, ask your doctor to check you for asthma, Dr. Enright says. Your physician may prescribe an inhaled asthma medication to see if it helps. Or she may perform what's known as a spirometry test and, if that signals asthma, an inhalation challenge—both of which help your doctor gauge your lung function.

2 READ YOUR PALMS

Iron deficiency leaves you exhausted and can reduce immunity, but your hands hold a clue.



Iron is your body's "energy" mineral, grabbing oxygen from every breath you take and delivering it to cells throughout your body. If you don't have enough, you can develop bone-weary fatigue, concentration problems, even shortness of breath and an irregular heartbeat. Unfortunately, deficiencies aren't uncommon: It's estimated that 20 percent of women (half of all pregnant women) and 3 percent of men have low iron. "It's very common to be anemic and not be aware of it, because it comes on slowly and insidiously," says family practitioner Lloyd P. Van Winkle, MD, at the University of Texas Health Science Center at San Antonio.

HOME CHECK Spread your palm wide. Are the creases pale? "No matter what your natural skin color, unusual paleness of your palm creases, or of your gums and the inside of your eyelids, is a sign of reduced circulation in small blood vessels near the surface of your skin due to low iron," Dr. Van Winkle says.

YOUR NEXT STEP Ask your doctor if you should have a hemoglobin or hematocrit test to check levels of iron-rich hemoglobin in your blood. Your physician should also examine your red blood cells (small and pale could mean trouble). A serum ferritin test, which measures levels of a protein that helps store iron, is good at flagging early signs of iron deficiency.

3 TAP YOUR TOES

Heart rhythm troubles trigger as many as 20 percent of all strokes. This simple test can help prevent one.

Off-rhythm heartbeats—the flutters and crazy palpitations of atrial fibrillation (AFib)—are responsible for up to 140,000 strokes each year in the United States alone. Seventy percent are fatal. Most could be avoided if it weren't for the fact that about a third of the estimated 2.2 million Americans with atrial fibrillation don't realize they have the condition.

"AFib isn't just the occasional missed heartbeat. You have extremely irregu-

lar rhythms," says Eric Prystowsky, MD, director of the Clinical Electrophysiology Laboratory at St. Vincent Hospital in Indianapolis. "The upper chambers of the heart just quiver. That lets blood pool briefly in the heart, which can allow a clot to form. When a beat pushes the blood out, the clot can go right to the brain."

HOME CHECK Tap your foot to the rhythm of your pulse (find it by placing a finger on your neck or wrist) for one minute. In several studies, this test alerted doctors to over 90 percent of people with atrial fibrillation, as confirmed by heart monitoring. "If the beat is so irregular that you can't tap along, relax for an hour and check again," Dr. Prystowsky says. "If it's still extremely uneven, mention it to your doctor."

YOUR NEXT STEP After listening to your heart, your family doctor or cardiologist may order an electrocardiogram, which gives a detailed look at how your heart is beating. Some people with atrial fibrillation take blood thinners to prevent a stroke; sometimes other medicines or procedures are needed to control heart rate and rhythm.

4 THE TWO-MINUTE DIABETES Q&A

Uncontrolled diabetes doubles your risk of heart disease and shortens life by 10 to 15 years. Here's how to know if you're headed for trouble.

Shockingly often, doctors miss opportunities to test people at high risk for diabetes. The result: According to a Centers for Disease Control survey, just 4 percent of people with prediabetes have been told by their doctors that they have the condition. And another 5.7 million are living with undiagnosed diabetes.

So grab a pencil—this self-check is easy, says study author Heejung Bang, PhD, of Weill Cornell Medical College, but it can find nine out of ten people at risk for dangerous blood sugar problems.

HOME CHECK Circle your answers, then add up the points.

1. How old are you? (Under 40: 0 points; 40–49: 1; 50–59: 2; 60 or older: 3)

2. Are you a woman (0) or a man (1)?

3. Does a family member (parent, brother, or sister) have diabetes? (No: 0; yes: 1)

4. Do you have high blood pressure or are you on medication for high blood pressure? (No: 0; yes: 1)

5. Are you overweight or obese? (Normal weight: 0; overweight: 1; obese: 2; extremely obese: 3)

6. Are you physically active? (No: 0; yes: -1)

YOUR NEXT STEP "If your total score is 4 or higher, there's a good chance you have prediabetes," Bang says. "If it's 5 or higher, you're at high risk for diabetes. See your doctor for a blood sugar test."

A bonus from testing: Treating diabetes early could save $2.5 billion

5 BEND AND STRETCH

Stiff blood vessels make your heart work harder. This low-tech test may help you prevent a heart attack.



Like birthday party balloons, healthy blood vessels are flexible, widening and narrowing as needed throughout the day. But when arteries stiffen—due to aging, extra pounds, a buildup of plaque in artery walls, a sedentary lifestyle, or diabetes—blood pressure rises. And so does your risk for fatal strokes and heart attacks.

Testing for stiffness usually requires high-tech equipment found in research labs. But now you can get a sense of whether your arteries are as supple as a silk stocking—or as inelastic as an old bicycle tire—just by sitting on the floor. In a recent study of 526 women and men, researchers found that those who were the most flexible on a sit-and-reach test also had the most supple arteries, as measured by a pulse-wave pressure test.

What's the connection? Artery walls are made up of the same components—smooth muscle cells and connective tissue—as the muscles in your hips and back, notes lead researcher Kenta Yamamoto, PhD, of the University of North Texas Health Science Center at Fort Worth. So whatever stiffens one will have the same effect on the other.

Sure enough, there's some evidence that activities that keep big muscles pliant, such as stretching, may "soothe" nerve activity that also affects artery flexibility. And another recent study found that adults who started a program of regular stretching significantly increased the flexibility of the walls of their carotid artery—the vessel that supplies the brain with blood.

HOME CHECK Sit on the floor with your legs straight out in front of you, toes pointed toward the ceiling. Bend forward from your hips and stretch your arms toward your feet. Try to touch your toes.

YOUR NEXT STEP If you can't reach your toes, you may be at increased risk for arterial stiffness. If you haven't had your blood pressure checked in the past year, do it now. "You should get your blood pressure checked at least every other year," Yamamoto says. Adding some stretching exercises to your routine just might limber up your muscles *and* your arteries, he adds.

6 MEASURE YOUR MIDDLE

With an oversize waist, your risk of an early death shoots up—even if you aren't overweight.



A bulging middle is a signal that you have lots of visceral fat, the thick, yellow fat deep in the abdomen that pumps fatty acids, appetite-stimulating hormones, and inflamma-tion-fueling chemicals into the bloodstream.

In a recent study of 360,000 people from nine European countries, big waistlines predicted disaster even for people who weren't overweight—increasing the risk of premature death 79 per-cent for women and doubling it for men. A big middle is particularly hard on the heart, tripling the risk of fatal heart disease in a Harvard School of Public Health study of 44,636 women.

Even so, experts say, doctors frequently fail to measure the waists of normal-weight patients—which means they're likely to be missing "ab fat" in these otherwise slender patients.

Forget vanity—a big belly ups your risk of breast cancer and colon cancer

HOME CHECK Bare your torso and stand in front of a mirror. Circle your waist with a tape measure, then move it down until the bottom of the tape rests at the top of your hip bones. This is the position recom-mended by the National Institutes of Health. Don't hold your breath or cinch the tape too tight. Write down your number.

YOUR NEXT STEP For men, risk for diabetes and heart disease begins to rise with a reading of 37 inches; a measurement of 40 inches and up is con-sidered high risk. For women, 32 inches is the danger threshold, and 35 inches is high-risk ter-rain. Best ways to shrink visceral fat? Exercise and a Mediterranean-style diet (plenty of produce, grains, fish, and monounsatu-rated fat from olive oil and nuts). Because visceral fat is more metabolically active than fat on your hips or elsewhere, it's actually apt to come off relatively fast as you start to lose weight.

7 THE TWO-SECOND **DEPRESSION QUIZ**

Depression is bad for your heart, memory, and more.

Television is jammed with commercials for antidepressants. Celebrities from actress Ashley Judd to astronaut Buzz Aldrin have revealed their struggles with gloom. Even so, about 70 percent of America's 15 million depressed women, men, and children get no help for their condition.

That's due at least in part to doctors who fumble the ball. When psychiatrist Alex J. Mitchell, MD, of the University of Leicester in the United Kingdom, analyzed 41 studies involving 50,000 people from around the world (including the United States), he found that doctors missed depression 50 percent of the time. That's an important oversight, since undiagnosed depression is linked to higher risk for diabetes, heart disease, and other chronic health conditions, plus suicide.

HOME CHECK It can be tricky to figure out if you're just a little down or depressed enough to ask for help. But when New Zealand family doctors asked 421 men and women a couple of questions, they spotted 97 percent of those suffering from depression, say researchers from the University of Auckland. The quiz isn't perfect; like other depression screening tests, it turns up lots of false positives. Consider it a doctor-patient conversation starter:

1. During the past month, have you often been bothered by feeling down, depressed, or hopeless?

2. During the past month, have you often been bothered by having little interest or pleasure in doing things?

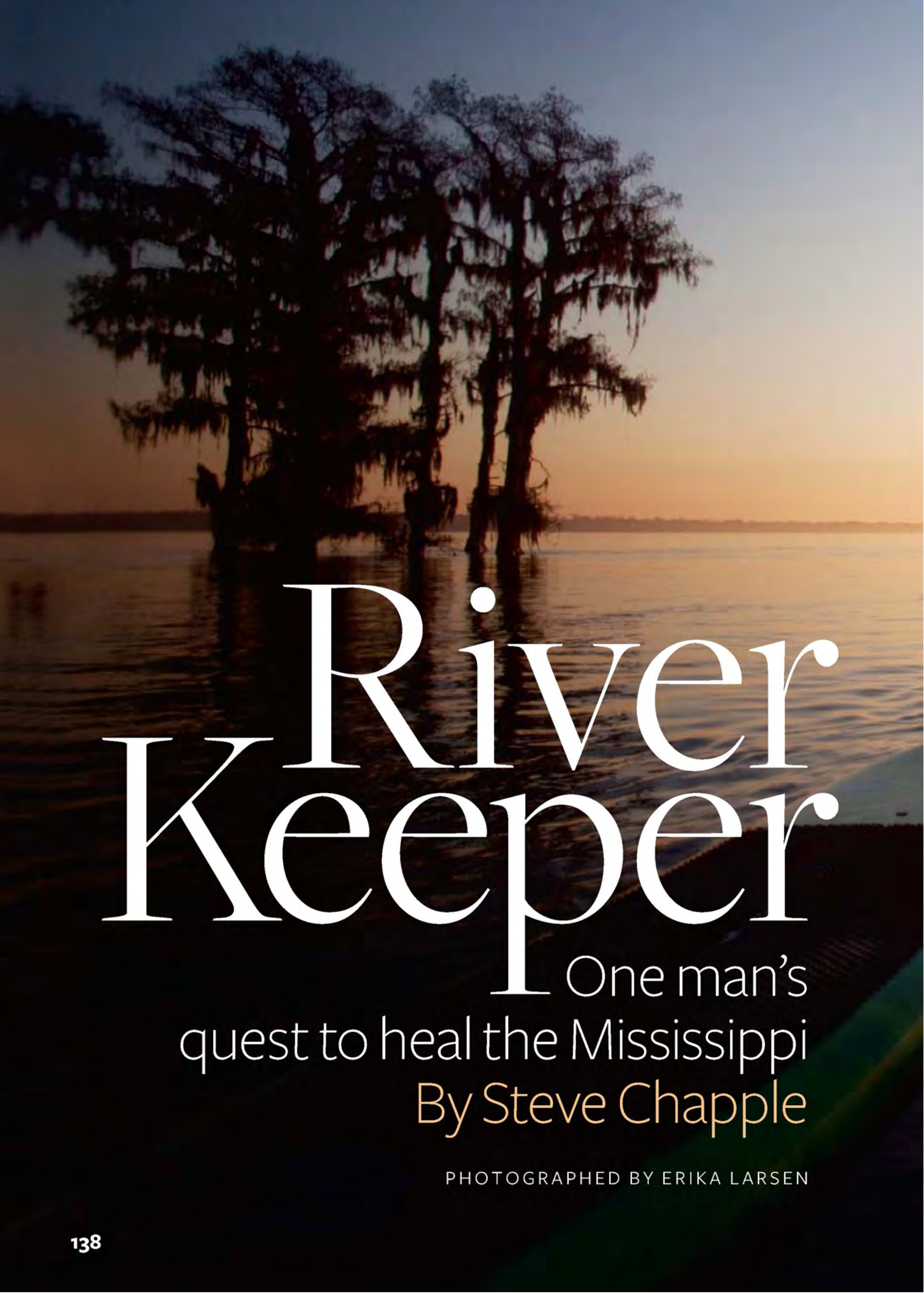
YOUR NEXT STEP "If you answered yes to one or both questions, it's worth talking with your doctor," says psychologist Marian R. Stuart, PhD, a professor emeritus at the University of Medicine and Dentistry of New Jersey–Robert Wood Johnson Medical School. "The good news is that there's a lot of help available, including counseling, exercise, gratitude journals, and, if you need them, antidepressants. The first place to go is to your family doctor, who hopefully knows you and the circumstances of your life."

ALL THE NEWS THAT GIVES US FITS, WE PRINT

Four of these five headlines came from real news sources. Can you tell which one appeared in the satirical newspaper the *Onion*?

1. "U.S. Continues Quagmire-Building Effort in Afghanistan"
2. "Federal Agents Raid Gun Shop, Find Weapons"
3. "Missing Baby Found in Sandwich"
4. "Alleged Bremerton Shoplifter: Nothing Goes Right When I Do Heroin"
5. "Officials Warn About River Dangers After Drowning on Green River"

1. *Onion*; 2. *Tulsa World*; 3. myfoxboston.com; 4. *Kitsap* (Bremerton, Washington) *Sun*; 5. *Seattle Post-Intelligencer*



River Keeper

One man's quest to heal the Mississippi

By Steve Chapple

PHOTOGRAPHED BY ERIKA LARSEN



Eight days and 140 miles to go: the final leg of an 18-month journey for Kristian Gustavson.

In a black wet suit and a combat life vest, with a 15-inch bowie knife strapped to his chest, Kristian Gustavson looks like the Navy SEAL he almost was. But the blond, gregarious 25-year-old environmentalist is on a different kind of mission. He hefts a 12-foot stand-up paddleboard, lays it on the water, and glides effortlessly across the muddy current to survey the junction of two of the most famous rivers in the country: the Mississippi and its main offshoot, the Atchafalaya.

Gustavson is here to begin an eight-day, 140-mile trip through the Atchafalaya Basin to the Gulf of Mexico—the culmination of his dream to canoe the entire Mississippi. As cofounder of Below the Surface, an advocacy group for America's waterways, he says the purpose of his trip is to get the word out: "The Mississippi is the most polluted big river in the country, but I believe it can come back." He's written a well-received consumer guide to curbing river pollution called "90 Ways in 90 Days."



Plastic trash in stagnant water at the edge of the Old River complex on the Mississippi.



The Gaining Ground expedition (from left): Pribram, Westphal, Criscuolo, Chapple, Gustavson, and Ruskey.

Now, to prove his point, Gustavson is taking a crew of scientists and adventurers down the Atchafalaya, a wild stretch of river that runs parallel to the Big Muddy all the way to the Gulf.

Gustavson turns on his paddleboard and scoots back to shore looking like a giant water spider. He's at home on the river. He has already canoed the Mississippi from Fort Defiance, Illinois, to Baton Rouge, Louisiana, at the height of the 2008 floods. Now, a year and a half later, he is back to finish the job, with a goal of gauging the difference between the two rivers and using his discoveries to help fight water pollution.

"Every generation has its explorers, but I don't see the explorers in mine. Let's create some," Gustavson says around the campfire the second night near Angola, Louisiana, across from the famous penitentiary. He looks out at Guy McClellan, a chemist who will sample the water for nitrates, chlorine, and turbidity, and Jared Criscuolo, a young solar-energy consultant who is the other cofounder of the group. Also present is river guide John Ruskey, whose Quapaw Canoe Company has built the expedition's main boat, a 30-foot replica of a French Voyager canoe that has been carved from layers of a bald cypress tree. And there's professional surfer James "Eco-Warrior'" Pribram, who has flown up from Mexico for one of the coldest weeks in Louisiana on record. Tomorrow, they will continue their weeklong paddle through the largest river swamp in the nation, meeting up with river keepers on



Gustavson takes a break at a campsite near Angola, Louisiana.

steel flatboats, engineers from the Army Corps of Engineers, and bird experts from the Audubon Society, all with stories to tell about the flora and fauna of the Mississippi Delta.

The next morning, at Simmesport, Louisiana, Gustavson and crew are joined at their rain-sodden campsite by Melanie Driscoll from the Audubon Society. She explains how a more natural river creates a more hospitable corridor for migrating birds. Some 40 percent of all waterfowl from the northern states pass through or rest here in Louisiana, along with tens of millions of songbirds. "The Mississippi Basin is largely deforested, whereas the Atchafalaya comprises the largest remaining hardwood forest and swamp in the United States," says Driscoll, "one million contiguous acres, which provides so much more food, cover, and protection from predators and resting places for birds on the move."

Soon the little flotilla—two boats and a paddleboard—shoves off. The Atchafalaya runs cleaner and wilder than its big brother, braiding into a thousand bayous and cuts, swirling around countless islands, and passing through the roots of millions of bald cypress trees, willows, and marsh grasses. All that vegetation filters pollution from upstream like a giant feathery fan, while the river itself drops tons of silt and sediment along the way, adding miles of new delta to Louisiana. The Mississippi, by contrast, which is channeled and leveed all the way to the Gulf of Mexico, loses about a football field's worth of rich delta soil every 38 minutes.

Later that day, Gustavson chats with a crew of volunteers from the



ILLUSTRATED BY 5W INFOGRAPHICS


The Atchafalaya Basin is home to over 250 species of birds and 100 kinds of fish.

organization Living Lands and Waters who are picking up trash along the banks. Brent Bordelon, a foreman from the local grain-loading facility, is helping with the cleanup on his day off. "The river is too high to safely dock ships," he says, and besides, he'd rather be here, "doing good for the community."

Gustavson agrees: He arises each morning at dawn, a smile on his face—glad to be on the river again, doing good. Born in Bloomington, Illinois, he grew up in nearby Libertyville, the son, stepson, and nephew of fire and police officers, construction workers, and the occasional lawyer. His mother taught him to swim almost before he could walk, and he found himself drawn to water, as a lifeguard, a boater, and a candidate for the U.S. Naval Academy. At the University of California, San Diego, he majored in political science and taught surfing in his spare time.

Funds for part of his Mississippi journey came from Surfrider Foundation, in California, an environmental group that focuses on oceans. Thus the inclusion of the stand-up paddleboard, which Gustavson feels is symbolic of joining river to sea. "Everything that goes into the oceans comes from the rivers," he reminds the group, "plus," he says with a laugh, "maybe a little rain"—which was nothing compared with his first trip down the Mississippi, which was

cut short by floods, storms, and a category 2 hurricane named Dolly.

Before making camp, the canoes pass under the bridge at Melville, where in the flood of 1927 the levees broke, and men ran through town firing guns and shouting, "Crevasse! Crevasse!" to warn residents to seek higher ground. Newspapers described a wall of water 30 feet high in some places sweeping away everything in its path.

But for Gustavson's expedition, the river is flat, if fast, high, and cold. A few barges chug past, hauling immense piles of rock, but most of the commercial traffic is to the east on the Mississippi. Below the Interstate 10 bridge, the hardwood forest appears impenetrable. They've entered the heart of the swamp. Gustavson takes the paddleboard and disappears to explore the landscape of sunken trees and abandoned oil pipelines. The canoes veer onto a side stream called the Little Atchafalaya. Now the brown winter vines and leafless trees seem to encircle the expedition as it moves under a sky as muddy as the river. The spongy bayou ground is filled with lakes, ponds, and little pools. In the coldest water, crayfish dig tunnels into the warmer earth. The surfer, who's been trailing the canoes on the paddleboard, steadies himself against a mammoth tree trunk cantilevered over the backwater. The tree, rotten, breaks with a crash and knocks him off the board. He's in a wet suit but is soon shivering. "Yep," says McClel-



"Hypothermia, snakes—cottonmouths and copperheads—black widow and brown recluse spiders, and poison ivy": Guide Ruskey lays out the dangers of the bayou.

lan, the chemist, pulling out his water thermometer, "38 degrees. Cold."

"Build me a fire!" the surfer says, laughing.

Each night they huddle cheerfully around campfires. At a beautiful riverbank where the water twirls like a potter's plate, Driscoll, the Audubon expert, tries to call in a Southern barred owl with an eerie imitation. She tells how she once demonstrated her proficiency in owl on a first date and never saw the guy again. That evening, the crew meets a second Audubon official, Karen Westphal, an expert in coastal change, who points out another benefit of the slow-moving Atchafalaya. "The sediment drops out to create sandbars or fill in lakes and bayous," she says, "so that plants such as willows can begin to grow."

The next morning, it snows: Louisiana in February. It seems more like Montana. On this trip, some nights are crisp and clear, and others are dark, "as dark as the inside of a cow," to quote Mark Twain from *Life on the Mississippi*, which serves as Gustavson's reading for the trip.

Gustavson's quest to canoe the entire Mississippi began in June 2008 with an old metal boat and a dream. The canoe was the same 17-foot Grumman used by his uncles Greg and Bob and a mutt named Shags to go down the Mississippi back in 1966. For years, it had been lying in the grass in his grandmother's backyard in Bloomington.

That spring, Old Man River was out of control. The rains wouldn't stop. Gustavson's grandmother cried at the thought of his leaving, but his stepfather asked, Wasn't this the best, not the worst, time to jump on the Mississippi, an opportunity to experience nature at the height of its powers?

"It's a small canoe, Kristian, but your entire family will be in it with you," added Uncle Greg.

The first day of that trip almost crushed his spirit. He was tossed from one side of the river to the other by the huge swells. Next morning, he packed 100 pounds of rocks into the bow for ballast. The weight kept him pointed downstream but made the canoe hard to maneuver. Waves from passing barges washed over the gunwales. He considered quitting. At camp that night, he found a tattered American flag wrapped around a willow. He carefully folded the flag and put it in the canoe, hoping it would bring him good luck. That night, he made it to New Madrid, Missouri, where he called his mother, who told him to persevere. "Do what you can do, and get back on the water," she said.

Then came the worst storm of the trip. "I was swearing. 'Give me a break! I can't take much more! Calling all angels!' I called out to my grandfathers, both of whom had passed away. 'Hey, if you know anybody up there, call in some favors!'" And then he calmly told himself, "I've come this far. I'm not going to back down now." Afterward, the strangest thing happened. "It just stopped," he says. "I've been through a lot of storms, and I've never seen that happen."

That night in Memphis, he slept the sleep of a weary traveler, and when he woke up, he decided to call his father. "Dad, I can't do this by myself. Why don't you come on down?"

Now his journey became even more about family. His parents had broken up when he was a child. His father and he had never spent much time together. Now they had to get along while riding a raging river. They stared in awe as a 12-foot alligator scooted under the canoe just above Natchez. "My dad shrugged it off as part of the experience," says Gustavson. "He's never been the most emotional guy."

Nearer to Baton Rouge, the river changed. The air smelled metallic and acrid. Chemical Alley, people called it. To the Gustavsons, it was no longer a wilderness trip. Plus, Hurricane Dolly was about to roll in. "I was torn, with only two more days to go," says Gus-

Do More

Kristian Gustavson's 90-day plan to heal our waterways.

It takes 90 days for a drop of water to travel the 2,350 miles from the headwaters of the Mississippi in Lake Itasca, Minnesota, to the Gulf of Mexico. If we all performed one water-saving, nonpolluting task each day for 90 days, the river would look a lot better when that drop passed New Orleans. Here are eight of Gustavson's tips. For all 90, visit **www.belowthesurface.org**.

Pass on plastics. Plastic trash—mostly bottles and bags—is the most common form of marine pollution.

Turn off the tap. You'll save up to 240 gallons a month just from changing your habits while brushing your teeth or washing up.

Pick up after your pet. Pet waste contains harmful bacteria, including *E.coli,* and contributes to the buildup of oxygen-killing nutrients in the water, leading to algae blooms and fish kills.

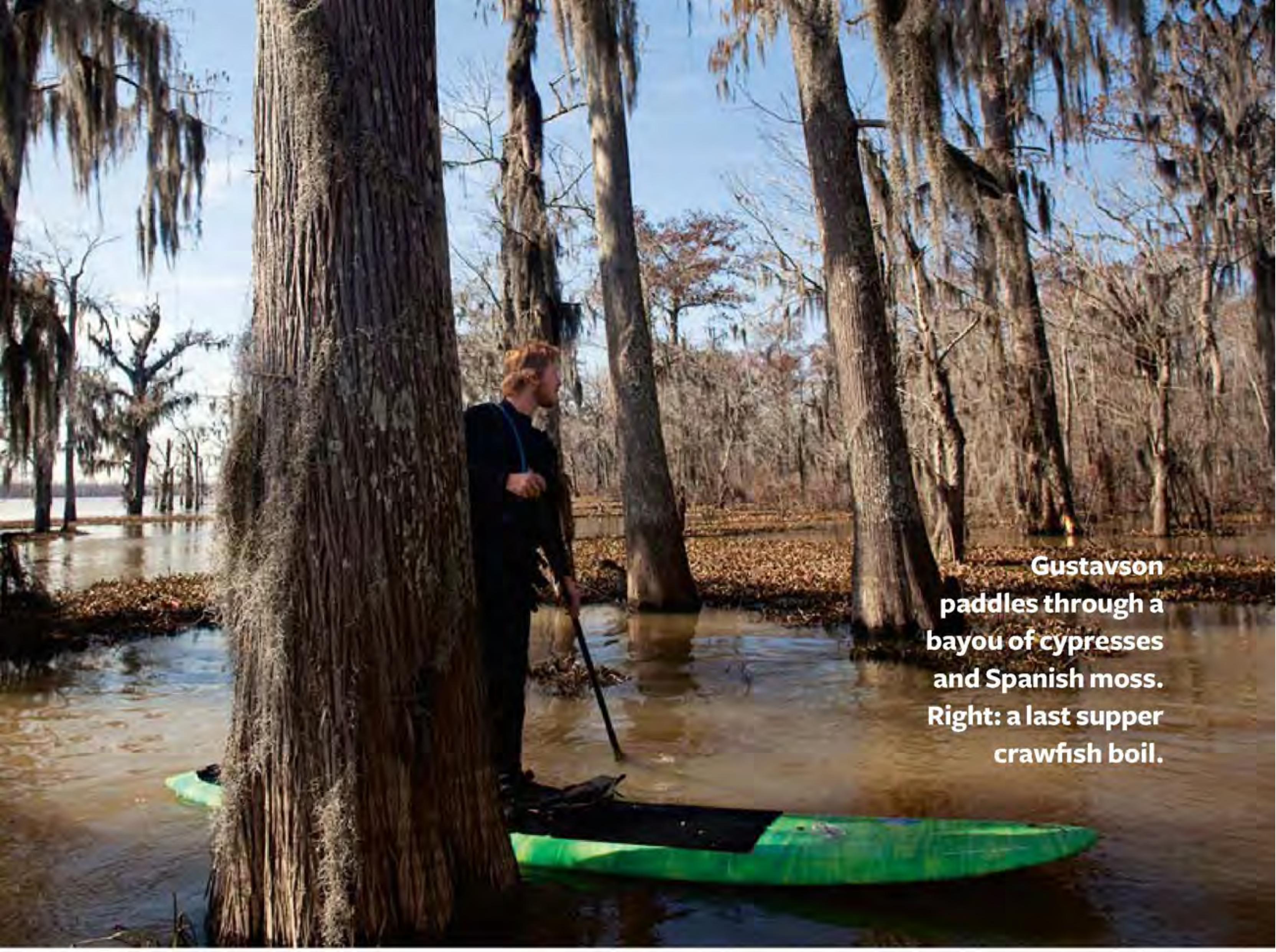
Buy energy-saving appliances. Power plants across the country use 136 billion gallons of freshwater every day. Get a list at energysavers.gov.

Dispose of toxic trash properly. Every year, U.S. households each generate about 100 pounds of hazardous waste, including paints, drain cleaners, fluorescent bulbs, and used motor oil. Follow local rules for proper disposal.

Use the car wash. Most commercial car washes process or send rinse water containing grease, oil, detergents, and other gunk to a treatment facility. Once in our waterways, oil, gasoline, and other hydrocarbons can kill marine life and pollute our drinking water.

Cut back on pesticides, herbicides, and fertilizers. Runoff from the overuse of these products leads to harmful algae blooms that cause "dead zones" and poison fish and marine plant life.

Clean your storm drains. Storm drains provide the fastest route for polluted water to travel from street to ocean. Half of all dirty storm water comes from our homes, driveways, and sidewalks.


Gustavson paddles through a bayou of cypresses and Spanish moss. Right: a last supper crawfish boil.

tavson, "but risking two lives wasn't worth it." Father and son pulled the canoe off the river, installed it unceremoniously in the back of a U-Haul, and trucked it home to Grandma's.

Gustavson vowed to finish, to come back and compare the natural Atchafalaya with the industrial lower Mississippi. Eighteen months later, his Gaining Ground expedition reaches Flat Lake, Louisiana, about 20 miles from the Gulf of Mexico. His band of adventurers is surrounded by majestic bald cypresses draped with Spanish moss, trees that define the ecology of the region. These great trees are in trouble, too, Gustavson points out. Pirate loggers illegally cut them down for garden mulch sold by the ton at unwitting chain stores. To sprout and grow, the cypresses also need the highs and lows that an undammed river provides. They thrive in varied degrees of wetness, but a steady water level drowns the seedlings, and the Atchafalaya, though wild in stretches, still has man-made structures controlling water flow. Gustavson tells his crew that protecting the cypress trees should be seen as a win-win situation. They help build up the delta and protect coastal cities, a trade-off that engineers and the rest of us (who pay for the rebuilding) are only now, after multiple hurricanes, beginning to understand.

At Flat Lake camp, on day seven, Gustavson hails a passing Cajun fishing boat and rockets into Morgan City to buy a container of Zatarain's hot powder. That night, the expedition has itself a crawfish boil.



In the morning, Gustavson and McClellan are up by 3:30, listening to the night sounds of beavers, nutrias, and owls. At dawn, they take water samples. Not unexpectedly, the nitrates are nonexistent in the high-water winter flow, as the endless swamp with its cane, cypress, and grasses naturally filters out chemicals, as Gustavson predicted. "Fertilizers, nitrates, and nitrites will show up after spring planting on farms upstream," says the chemist, "but this affects the main Mississippi much more."

They paddle through the eerie hanging cypresses, the sun a glistening sheen on the water. At Morgan City, the sea air hits them, and they hitch a ride with the Cajun fisherman down the Mississippi Delta for a first glimpse of the open Gulf.

Back on the dock in Morgan City, Gustavson stands in his black wet suit and delivers the last word for the expedition: "The river will provide. What it provides is up to us. Will that be the polluted contrast of the Mississippi with its dead zone in the Gulf of Mexico and eroded shorelines? Or one of the few growing coasts right here on the Atchafalaya?"

With Mardi Gras in full swing in New Orleans, Gustavson sleeps off his seven nights of swamp living in a hotel in Luling, Louisiana. For the young environmentalist, the journey's end means one dream fulfilled, while the other—a clean, natural Mississippi River—beckons him onward. This month, he'll return to UC San Diego to prepare for his future, starting work on an advanced degree at the Scripps Institution of Oceanography.

IT SEEMED LIKE AN EMERGENCY AT THE TIME

After Elaine Owens saw a red glow in her trailer's bathroom, she called 911 to report a fire, then she led the other occupants out to safety. When firefighters showed up, reported theworldlink.com, they discovered that the flames were actually sunlight reflected off the shower curtain.

A Polish student called the cops on his mother, saying she was guilty of psychological torture. Her offense, according to Ananova: asking him to take a bath and clean his room.

Don't You

We all have our cherished theories about everything mention history. But the facts tell a different story.

BY HERB REICH

FROM THE BOOK
DON'T YOU BELIEVE IT!



Showman P. T. Barnum said, "There's a sucker born every minute."

No, he didn't. Here's how we fell for this misconception, according to the Barnum Museum: In 1868, a man named George Hull, of Binghamton, New York, arranged for a slab of gypsum to be carved in the shape of a huge human being, then had it treated to resemble an ossified corpse and buried it

Believe It!

from famous quips to favorite cures, not to
How many of these five myths did you buy?

on a farm near Cardiff, New York. About a year later, the artifact was "discovered" when the owner of the farm engaged some friends to help dig a well. Newspapers everywhere picked up the story of the "Cardiff Giant," and soon thousands of the curious were paying 50 cents apiece to view it. Hull sold part ownership to a group of investors led by a man named Hannum, who moved the giant to Syracuse and doubled the admission fee.

Barnum made an offer to buy the giant but was turned down. Not to be outdone, he had a duplicate giant carved, which he exhibited, claiming Hannum had sold the original to him and had replaced it with a fake. Newspapers picked up Barnum's version, and the crowds started coming to see *his* giant. It was then that Hannum—not Barnum—was quoted as saying, "There's a sucker born every minute," assuming his giant was real and the thousands paying to see Barnum's fake were being ripped off.

Hannum sued Barnum for calling his giant a fake. In court, the original hoax was revealed, and the judge ruled for Barnum, finding that Hull's Cardiff Giant was a fake and Barnum was thus not guilty of anything.

Hannum and Hull have long since been forgotten, but the "sucker" quote has stuck to Barnum—who was nobody's fool.

During the infamous Salem witch trials, several people were burned at the stake.

Didn't happen. It is true that in the hysteria of 1692, more than 100 people in the Salem, Massachusetts, area were accused of practicing witchcraft. Surviving documents reveal that 13 women and seven men were executed—19 by hanging, and one, Giles Corey, pressed to death by having increasingly heavy stones piled on his chest. Several others died in prison while awaiting execution. But not one was put to the torch.

Europe was a different story. The witch hunt had started there in the 14th century

ILLUSTRATED BY EDWIN FOTHERINGHAM

and intensified during the brutal Inquisition by which the Catholic Church hoped to eliminate heretics—that is, people who didn't conform to church teachings. It was most active between the late 1400s and the mid-1600s, with witchcraft, an accusation almost impossible to refute, high on the list of heresies.

By the time the Inquisition came to an end, some 50,000 people had been executed throughout Europe, often by fire. But in the colonies, horrific as the trials were, no accused witches were burned.

Baseball was invented by Abner Doubleday in 1839 in Cooperstown, New York.

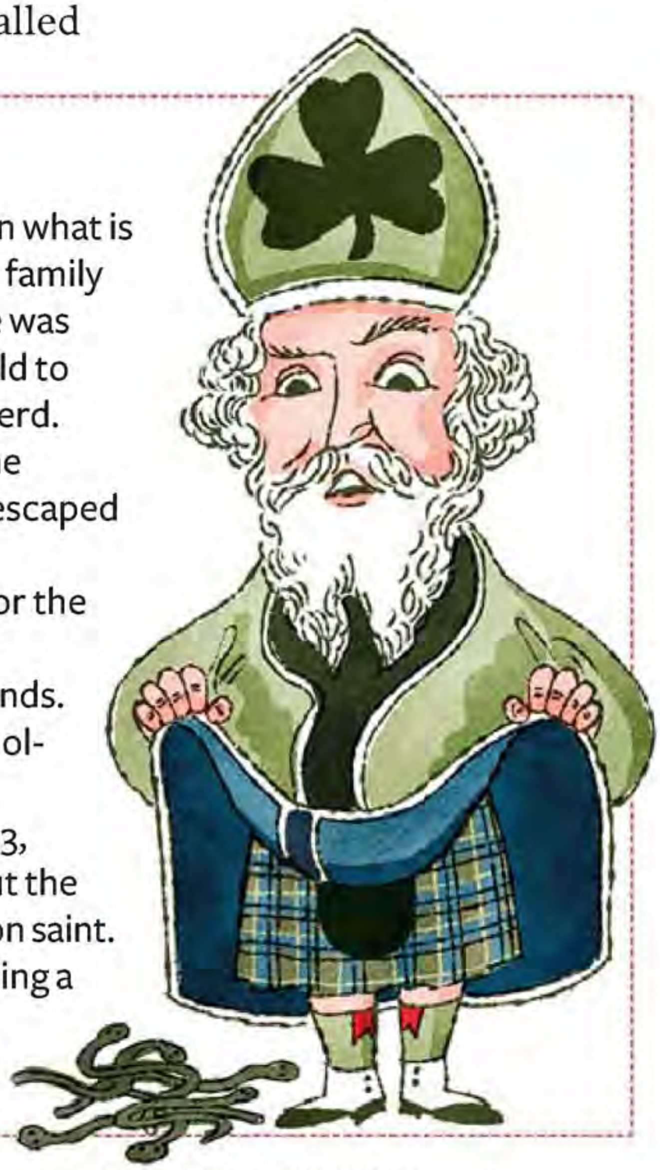
Strike that one. Doubleday had nothing to do with the game. American baseball has its nearest ancestry in an English game called rounders, a version of which, called town ball, was played in America in the 1800s. A main difference between rounders and American baseball is that in the English game, a fielder could put out a runner by hitting him with a thrown ball that was originally a fielded grounder. Printed rules for rounders have existed since 1828.

How, then, was Doubleday credited? In

Saint Patrick was Irish.

Blarney. Saint Patrick was born in 385 or 387 in what is now western Britain to a well-to-do Christian family of Roman heritage. When he was about 16, he was captured by a band of Irish marauders and sold to an Irish chieftain, whom he served as a shepherd. During this period, he spent considerable time learning the local language and customs. He escaped after six years and returned to Great Britain.

Several years later, he started his studies for the priesthood, and around 433, he went back to Ireland, built churches, and converted thousands. Although the exact dates are clouded in mythology, it appears that his mission lasted about 30 years; by the time of his death, in 461 or 493, Christianity had a firm hold in Ireland. In about the eighth century, Patrick became Ireland's patron saint. As for stories of driving out the snakes and using a three-leaf clover to explain the Trinity, most scholars consider them fanciful folklore.



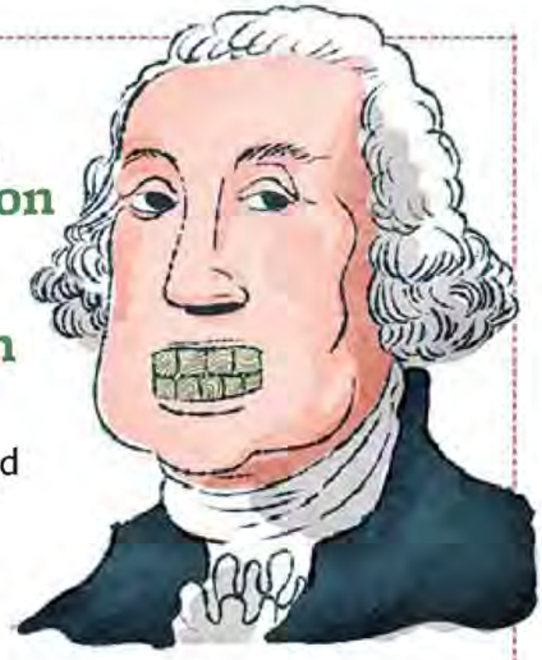
1907, a special baseball commission (which many felt had been convened purely to find an American "inventor") concluded that Doubleday was its man, based solely on a letter it had received from one Abner Graves, who claimed they had been schoolmates. Graves wrote that he had been present at Cooperstown in 1839 when Doubleday devised baseball. But it is now known that no member of the commission ever met with Graves or had any follow-up communication.

It should be noted that Graves was five years old in 1839, 15 years younger than Doubleday, who was enrolled at West Point at the time. Further, Doubleday, who later enjoyed a distinguished military career, left an extensive collection of letters and diaries, none of which mentioned baseball—nor did his obituary in the *New York Times*.

In fact, the Baseball Hall of Fame calls Alexander J. Cartwright, who was a founder of the New York Knickerbockers, the Father of Modern Base Ball. If he and his teammates did not invent the game, at least they helped give it a structure recognizable today.

But some myths die hard, and there is little doubt the Doubleday story will remain a hit with future fans. ■

George Washington's dour expression in portraits is due to ill-fitting wooden teeth.



No trees were chopped down in the service of our first president's mouth—although it is true that he suffered for years from dental pain. From the age of 24, Washington lost, on average, one tooth a year, and by the time he was elected president, he had only one of his own teeth left.

Dr. John Greenwood of New York City, who became known as the father of modern dentistry, produced several sets of dentures for Washington, none of which involved wood. Washington's favorites were fashioned from hand-carved hippopotamus ivory and gold; the upper and lower plates were hinged with springs that held them in position when they were opened. Washington had to bite down in order to keep his mouth closed. If he relaxed his jaw, his mouth would pop open.

After Washington's death, one set of his dentures was donated to the University of Maryland Dental School. Another is on display at Mount Vernon (it's currently on tour). After the dental school loaned its set to the Smithsonian for its bicentennial display in 1976, it was stolen. In 1982, half was returned. The other half has not been seen since.

Hit by a Train!

It's hard to imagine a disaster greater than the one that befell Daniela García. But the 29-year-old has reclaimed her life. "This is a *happy* story," she says.

BY ANNE MULLENS

She walks confidently through the halls of the Children's Rehabilitation Institute in Santiago, Chile. Parents here with their children smile at the young doctor in recognition, especially when they see her hands—or, more precisely, the metal devices that take the place of her hands.

Daniela García doesn't mind the stares of her young patients, many of whom have serious disabilities. She knows their conditions mean they, too, will need to find their own brand of courage. She isn't bothered when they ask, "Why do you have hooks for hands?" If they notice the prostheses that take the place of her legs, questions about those are welcome too.

"I like it when they ask," says Daniela. "It creates a bond between us."

Daniela, 29, is well known in Santiago—indeed, throughout Chile. She was named one of the country's Women of the Year in 2006 and 2007; her book about her experience, *Elegí Vivir* (*I Choose to Live*), was a bestseller. But she's a reluctant celebrity. She does not want to be known only as "the girl who had the awful accident." Nor will she allow what happened to her to be described as a tragedy.

"This is a *happy* story," she says.



OMAR CRUZ/JBGPHOTO



“It’s normal to be sad about something like this. But I didn’t want to stay in that sadness.”

Until October 30, 2002, Daniela García led the comfortable and largely trouble-free life of a young woman growing up in Chile's educated upper class. Her father, Cristián García, was a pediatric radiologist and a professor at Pontificia Universidad Católica de Chile (PUC); her mother, Leonor Palomer, was a dentist who had taken time away from her career to raise Daniela, her twin brother, Cristián, and her three younger brothers.

An excellent student, Daniela was in medical school at PUC, one of the oldest and most prestigious universities in Chile. At 22, she was in the final month of her fourth year, about halfway to her medical degree. Her boyfriend, Ricardo Strube, was studying for a business degree. The two loved the outdoors and spent their spare time riding bikes and playing sports together.

The hot days of the Southern Hemisphere's summer were approaching, along with final exams. So were the annual Inter-Medical School Games, a tradition in which almost all medical students in the country take part. It's a hotly contested event, with schools vying to bring back the most trophies from four days of volleyball, basketball, swimming, tennis, and soccer competitions. This year, it was being held in Temuco, about 400 miles south of Santiago.

Daniela wasn't sure she wanted to go. She was worried about an upcoming dermatology exam, and the trip down to Temuco would be expensive and long—more than nine hours overnight by train. Besides, for some reason, she felt a gnawing apprehension about the trip.

But her classmates badgered her to join them—they needed her soccer prowess—and finally, she relented.

When Daniela arrived at the train station, though, she didn't like what she saw. To accommodate the hundreds of students heading to Temuco, the train system had brought old passenger railcars back onto the line. The coaches had dirty windows, peeling paint, and broken and burned-out lights. Relax, she told herself. Train travel is safe.

As the train got under way, a few students pulled out guitars and began to sing. "Dance with us," some friends urged Daniela. But tonight she didn't feel like it. She stayed in her seat, peering through the darkening night at the passing landscape.

Then, around 10 p.m., a little more than an hour into the trip, two friends asked Daniela to walk with them to the other cars to see if they knew any of the other students on board. The lights overhead were not working, and it was hard to see as the group moved between the cars, one friend in front of her and another behind. Unbeknownst to Daniela, the walkway that typically covers the gap between the couplings of the coaches was not in place. Her tall friend Diego, with his long legs, stepped easily over the opening. But as Daniela followed him, the train went around a sweeping curve and the gap opened even wider.

She took a step and felt herself falling through the air.

To her friends, one minute Daniela was with them, and the next she was gone.

A passenger having a smoke at the side of the coach said, "Hey, that girl just fell!"

As if waking up from a disorienting dream, Daniela found herself lying in the middle of the tracks on a dark night.

She felt no pain, but something warm and sticky was on her face—blood from a small gash over her left eye. She moved her left hand to wipe the hair out of her eyes. Nothing happened. She tried again and it was as if her arm just fanned the air. Perplexed, she raised her head and looked. What she saw sent a shock of horror through her body: Her hand wasn't there. From halfway down her forearm, everything was gone.

> Daniela took a step between the cars of the train. Suddenly, she felt herself falling.

She looked to her right: Her other forearm and hand had been severed too. She tried to move and for the first time felt a surge of pain.

Daniela doesn't like to remember what she saw next. Her left leg was amputated between her hip and her knee. Her right leg was missing from just below the knee. The realization that she had four severed limbs was almost too much to endure, but as a medical student, she knew she must not panic.

Her blood loss would be massive, she realized, but another train could come any minute. She had to get off the tracks and find help soon or she would die. She was lying in a spot where the railroad tracks curved sharply. On one side was a tall hedge; on the other, a farmer's field. In the distance, she saw the lights of what looked like a gas station by a highway. Perhaps she could reach it if she crawled.

Somehow, despite her injuries, she rolled herself off the tracks so that she was lying in the gap between the north- and southbound rail lines. But she could go no farther. She began to yell, "Help me! Please help me!"

An itinerant farmworker named Ricardo Morales was taking a stroll, enjoying a cigarillo in the warm night air—his wife wouldn't allow him to smoke in the house. Morales had been beside the tracks when the train packed with students rattled by, their singing floating on the air. Now, hearing Daniela yell, "Help me!" he ran toward her.

"Don't move. I'll get help," he told Daniela and started running toward the gas station.

Even with the sketchiest of details about the accident, paramedic Victor Solis didn't hold out much hope of

finding the victim alive. Arriving just five minutes after the call, he quickly followed Morales to the tracks while fellow paramedic Patricio Herrera gathered more supplies.

A pack of wild dogs was hovering menacingly near Daniela. Solis yelled and waved his arms, shooing them away as he ran up beside her. She was moaning but, astonishingly, still lucid. To his amazement, she began to rattle off her name, her parents' names, their phone numbers, and the phone numbers of her uncles, also doctors. "Shh! Be quiet. Stay calm," he said as he knelt by her head. Herrera and two other paramedics came running down the tracks.

"Is she dead?" Herrera yelled to his partner.

Am I dead? Daniela wondered. Maybe I am. "I am not dead!" she yelled, startling Herrera with the strength of her voice.

The team worked quickly, stanching the flow of blood with tourniquets, then starting an IV. Suddenly, they heard a rumbling and felt the rails vibrating. A train was coming. It wasn't safe to stay, but they didn't have time to lift her out of the way.

"We must go," said Solis. "We will come right back."

"Don't leave me!" Daniela cried as the ambulance team darted to safety. She felt an enormous blast of wind as the train roared almost over her. It seemed to go on forever. As soon as it cleared, the paramedics ran back, relieved to find her still alive.

Eleven minutes after arriving at the site, they placed Daniela in the ambulance; they reached the hospital a few minutes later. "Am I going to be okay?" Daniela kept asking.

The stricken looks on the nurses' faces as they turned away without answering filled her with fear. Finally, in the elevator up to the operating room, she saw a gowned doctor with kind eyes and a beard. "Am I going to be okay?" she asked once again, searching his face. He held her eyes, smiled, and said, "You are going to be just fine."

For the first time since the accident, Daniela could relax. I have done everything that I could, she thought. She closed her eyes.

The call to the García home came just after 11 p.m. Daniela's twin brother answered; her mother heard him cry out. Daniela's father was volunteering in a clinic for the homeless when Leonor called to tell him that the hospital worker said they must come right away, that Daniela's injuries were serious.

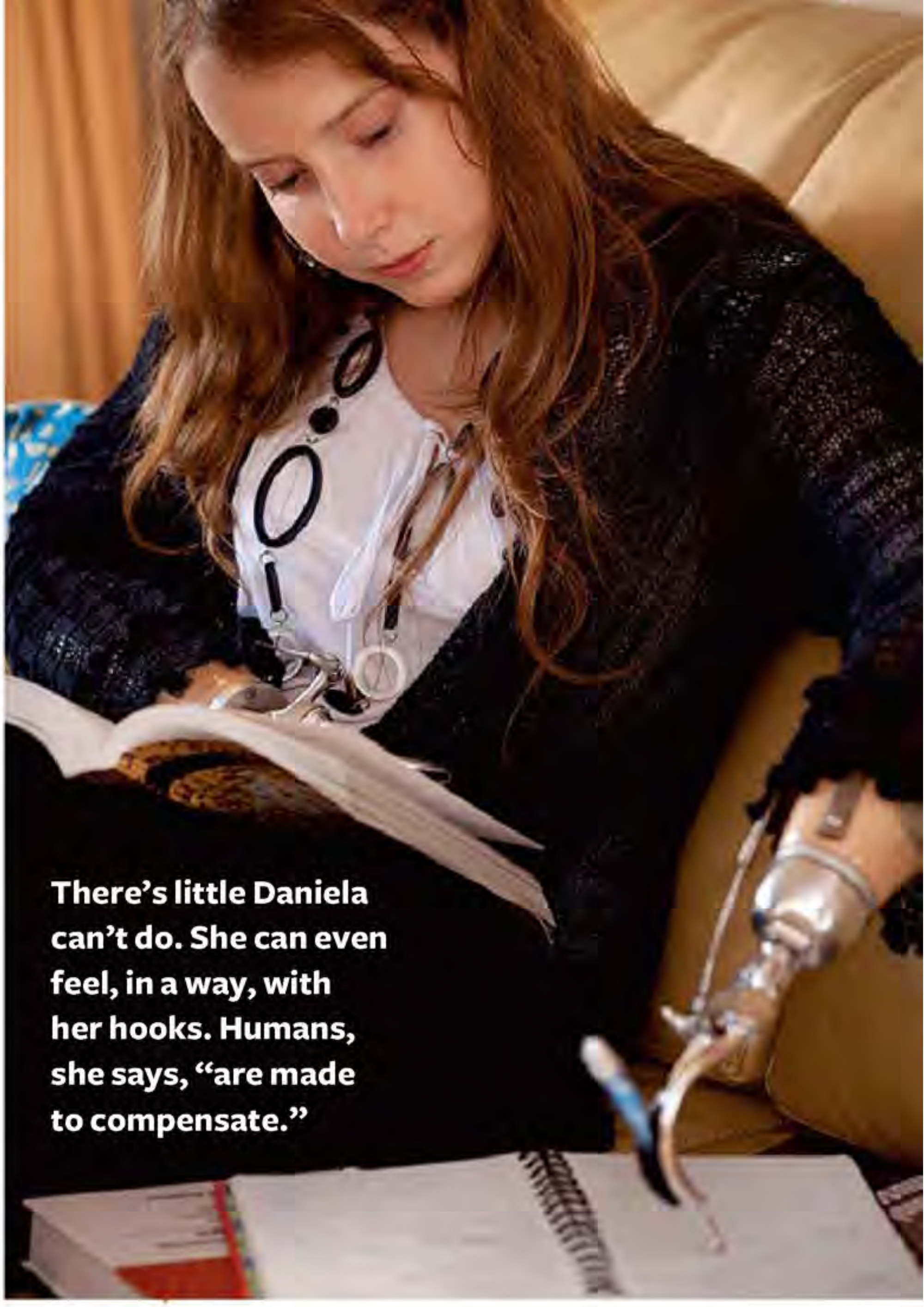
Daniela's boyfriend, Ricardo, had also received a call, this one from friends on the train. He raced to the hospital, where he joined the family in their vigil.

The crushing amputations by the train wheels made it impossible to reattach Daniela's limbs, but the surgeons did their best to clean and set the wounds for the best chance of healing. Afterward, Daniela remained in a medically induced coma for two days. When she woke up in the ICU, she saw Ricardo's face. "Will you

help me fix myself?"

"Yes," he said, but in his heart he wondered if he could.

As Daniela lay in her hospital bed, it sometimes felt as if her missing feet and hands were on fire or as if she'd stuck a finger in an electric socket. The phenomenon is called phantom pain—it was as though the circuitry of her brain and nervous system, in trying to cope with her lost limbs, had gone haywire. Drugs did little to relieve the agony. Eventually, she found that meditation and an alternative therapy called Reiki helped her tone down and control the nerve responses, at least most of the time.

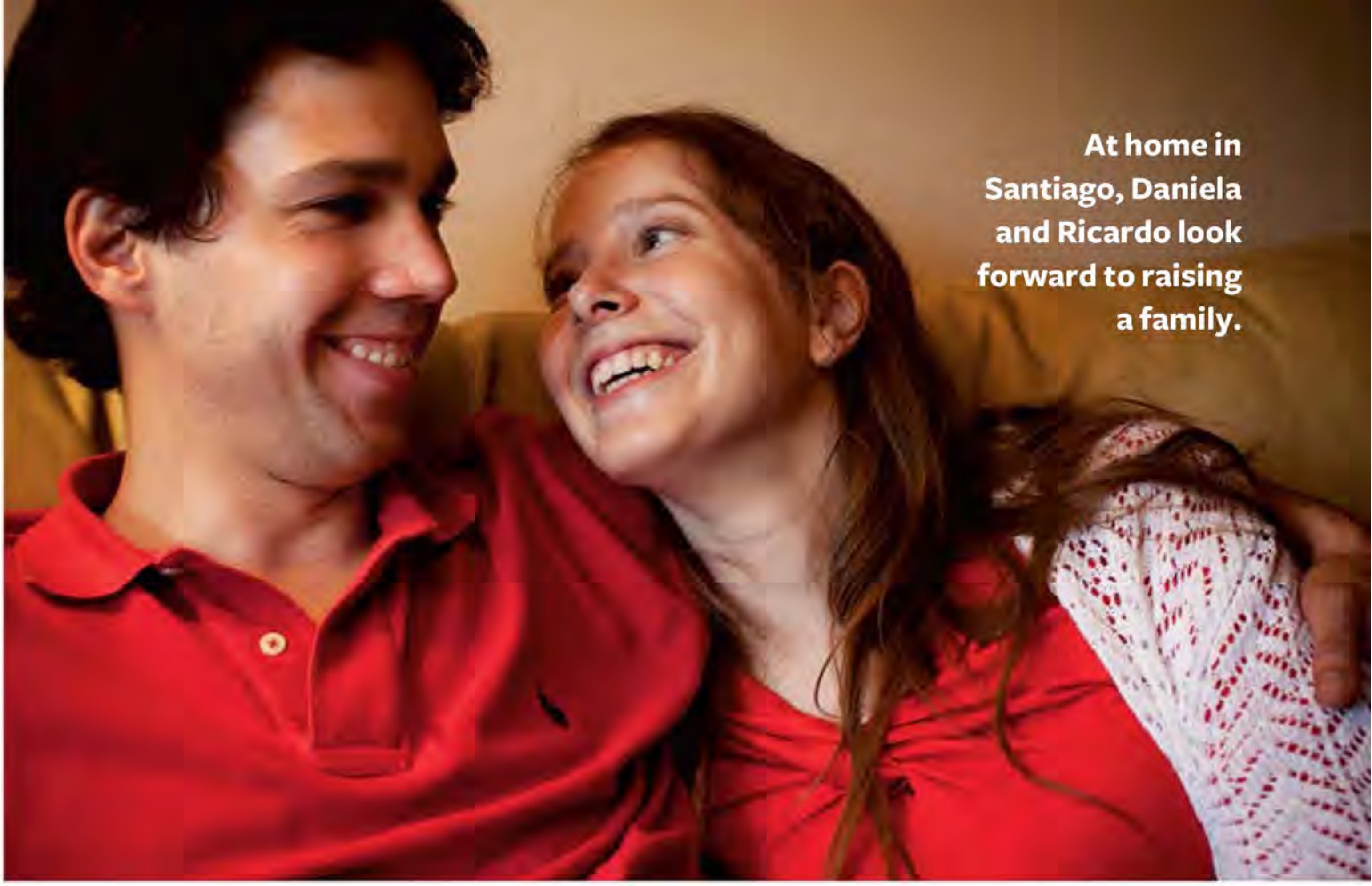


There's little Daniela can't do. She can even feel, in a way, with her hooks. Humans, she says, "are made to compensate."

Meanwhile, her father searched for the best place for Daniela to undergo the extensive rehabilitation she would need. He settled on the Moss Rehabilitation Institute at Albert Einstein University, just outside Philadelphia. Daniela arrived on a snowy Saturday in February. She would be there for six weeks, learning how to walk, dress, feed herself, and manage the other activities of daily living with artificial limbs.

Just four days after Daniela's arrival, her physical therapist, Maria Lucas, brought in a set of artificial legs. Daniela thought the simple forms of plastic and metal were the most beautiful things she had ever seen. After one leg was strapped on, Lucas helped her to an upright position. Daniela felt a surge of joy: For the first time since her accident, she was able to interact with another person eye to eye.

Her athleticism and determination immediately began to pay dividends. "Maria was holding me, and I said, 'Please, let me go,'" Daniela remembers. Lucas resisted—after all, it usually takes a long time for someone to learn to stand with prosthetic legs.


At home in Santiago, Daniela and Ricardo look forward to raising a family.

Finally, though, she gingerly released her grip. Sure enough, Daniela stood.

Now Lucas knew she could push Daniela—and Daniela kept pushing herself. "If Maria told me to walk to there, I would walk double the amount. I remember how tired I would get. Sometimes I did not even make it to dinner—I just went to sleep."

It wasn't just her body that was recovering. Daniela formed a special bond with the head of her unit at the Moss Institute, Dr. Alberto Esquenazi. Not only did he speak Spanish, but he had lost his own right hand in a laboratory explosion. In its place was a silver hook that he used unselfconsciously. It gave her hope. Soon after the accident, she had promised her classmates that she'd return to medical school; now, that dream began to seem realistic.

She learned how to use the muscles of her back attached to cables to open and close the hooks of her hands. She became so adept that she could deftly apply eye makeup, knit, and even pick up a single hair on a pant leg.

With every touchstone in recovery came some of the most intense happiness she had ever experienced. Yet the team at Moss couldn't help but worry that Daniela was heading for a crash. Dr. Esquenazi knew that amputees were often excited by new technologies to replace their missing limbs, only to experience a letdown when they realized the limits of what medicine could offer. Indeed, Daniela shed some tears as she came to terms with her new reality.

"The biggest shock for me was when I realized that things would never be the same as they had been before the accident," she says. "No matter how good my prostheses were,

they would never really be my legs or my hands. That was difficult."

Dr. Esquenazi didn't sugarcoat her situation: "You will always miss your hands. Nothing we do here will ever be like what you lost. But you have a choice. You can hide in a corner, or you can rise to the moment and do the best you can with what you have."

Daniela knew that he was right. And she held on to something else Dr. Esquenazi had said: "Your life will be what you do with it."

"I decided that if there was any limit to my recovery, it would have to be determined by my body—not by my mind," she says.

After her six weeks at the Moss Institute, Daniela flew home. Ricardo was waiting at the airport. She walked toward him on her new artificial legs, a huge smile across her face.

Almost exactly a year after her accident, she reentered medical school, determined that she would be given no special treatment. She was going to be a rehabilitation physician like Dr. Esquenazi. In September 2007, in front of 300 family members and friends, Daniela and Ricardo got married, saying their vows and then dancing the night away. And last fall, Daniela returned to the Moss Institute, this time not as a patient but as a doctor. Her six-month stint there was the final step in her training.

Soon after she arrived, she gave a talk to Moss's staff and patients, telling the story of her accident and its aftermath. The audience could see her hooks but, because she no longer walks with a limp, many didn't realize she is a quadruple amputee.

"People were blown away," Lucas says. "Daniela has an unbelievable ability to wholeheartedly accept the present moment. She never focuses on what was lost, and she never lets her injuries define her.

"I have seen many patients," Lucas continues, "and we always try to teach them how to reintegrate into the world. But Daniela taught us more about how to live life than we ever taught her."

PUT A TUNING FORK IN IT



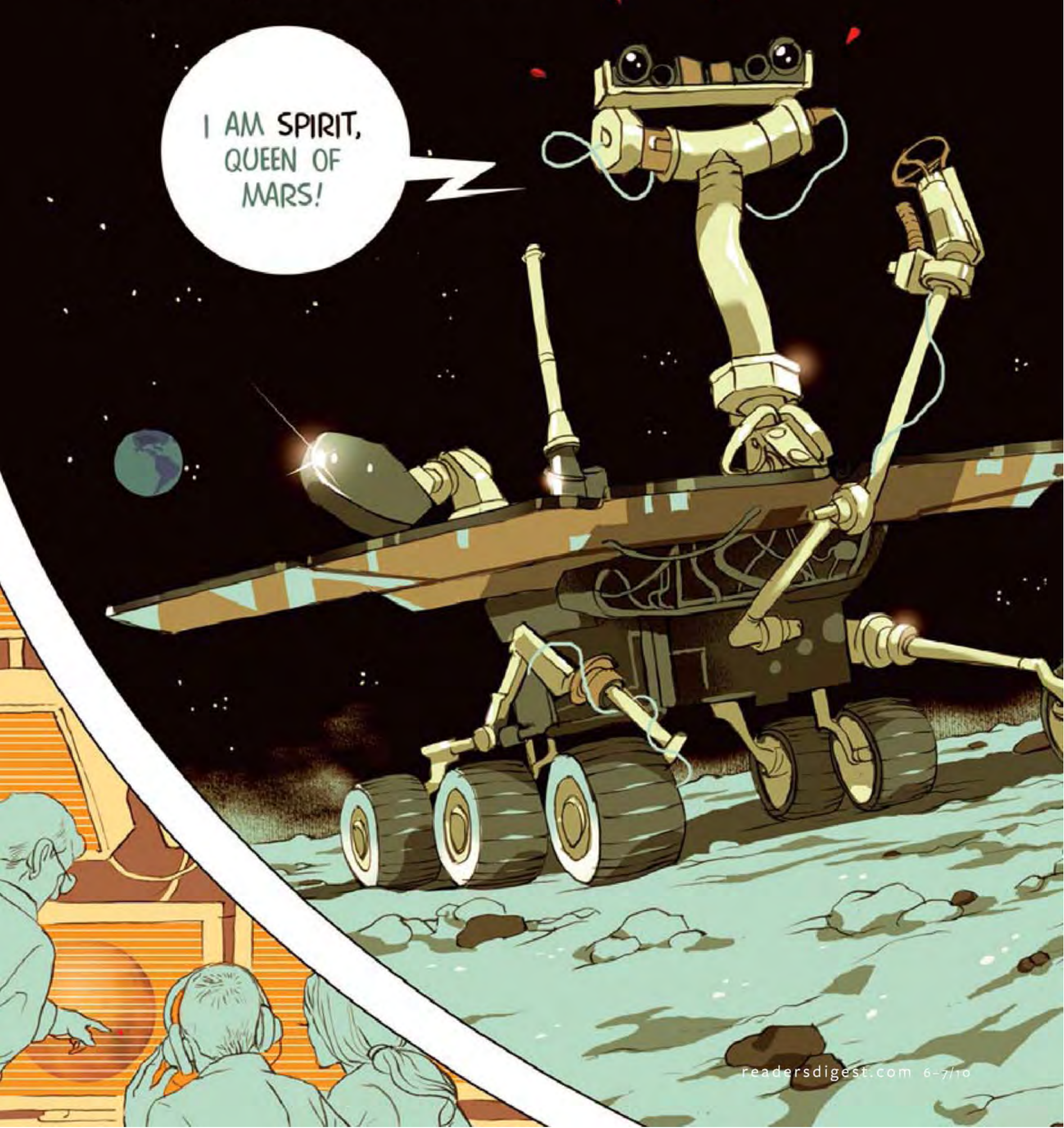
At a family gathering, we borrowed a karaoke machine, and my daughter asked her 90-year-old grandmother what song she'd like to hear. Her choice was "Unforgettable" by Nat King Cole. Three of us decided to give it a try. Afterward, my daughter wrapped her arms around her grandmother and said sweetly, "We sang that because we love you."

Her grandmother replied, "And I listened because I love you."

Helen Collins

Robots on

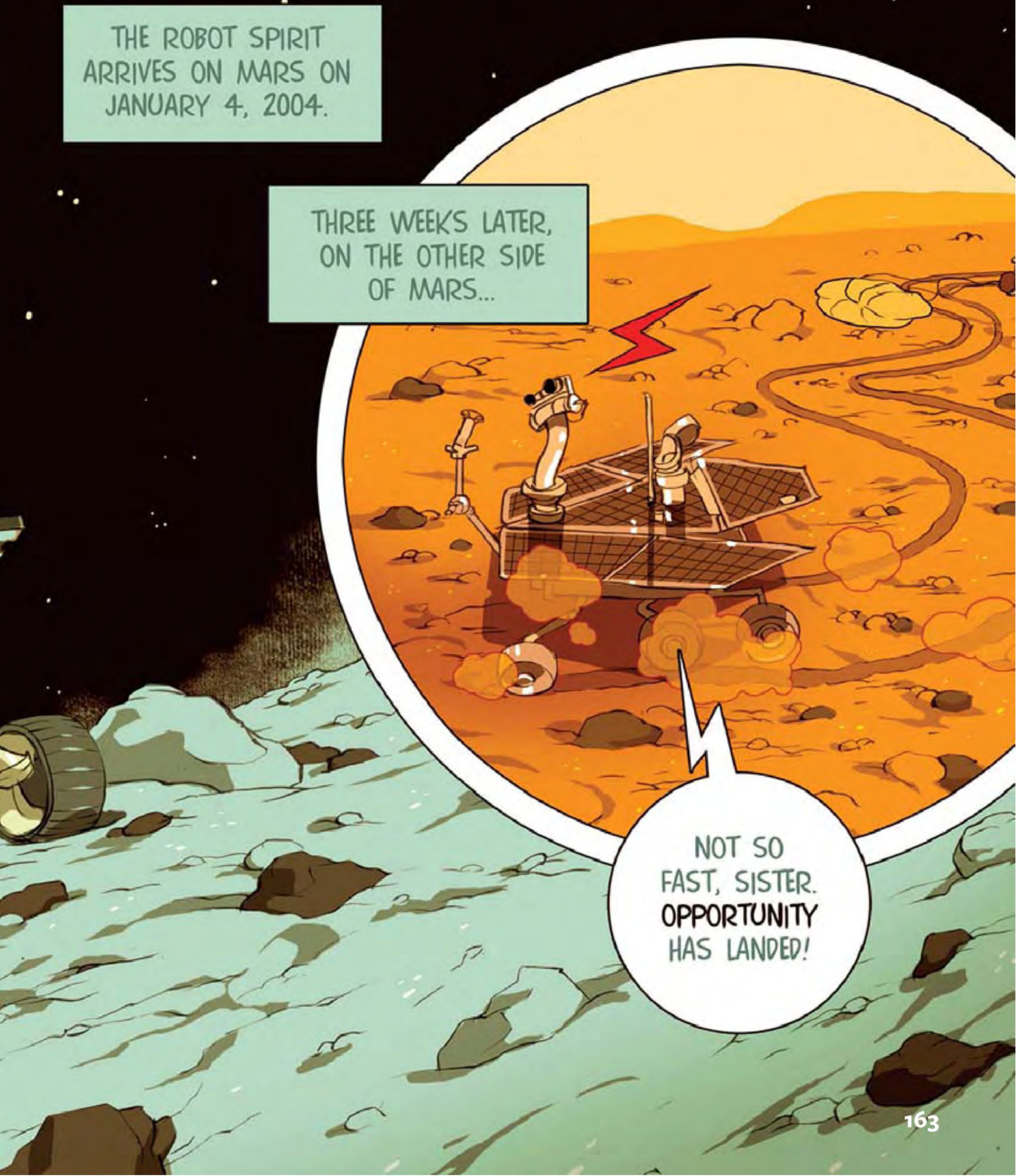
A pair of quirky 'bots is breaking records exploring the Red Planet



Mars!

BY A.J.S. RAYL

ILLUSTRATED BY TOMER AND ASAF HANUKA

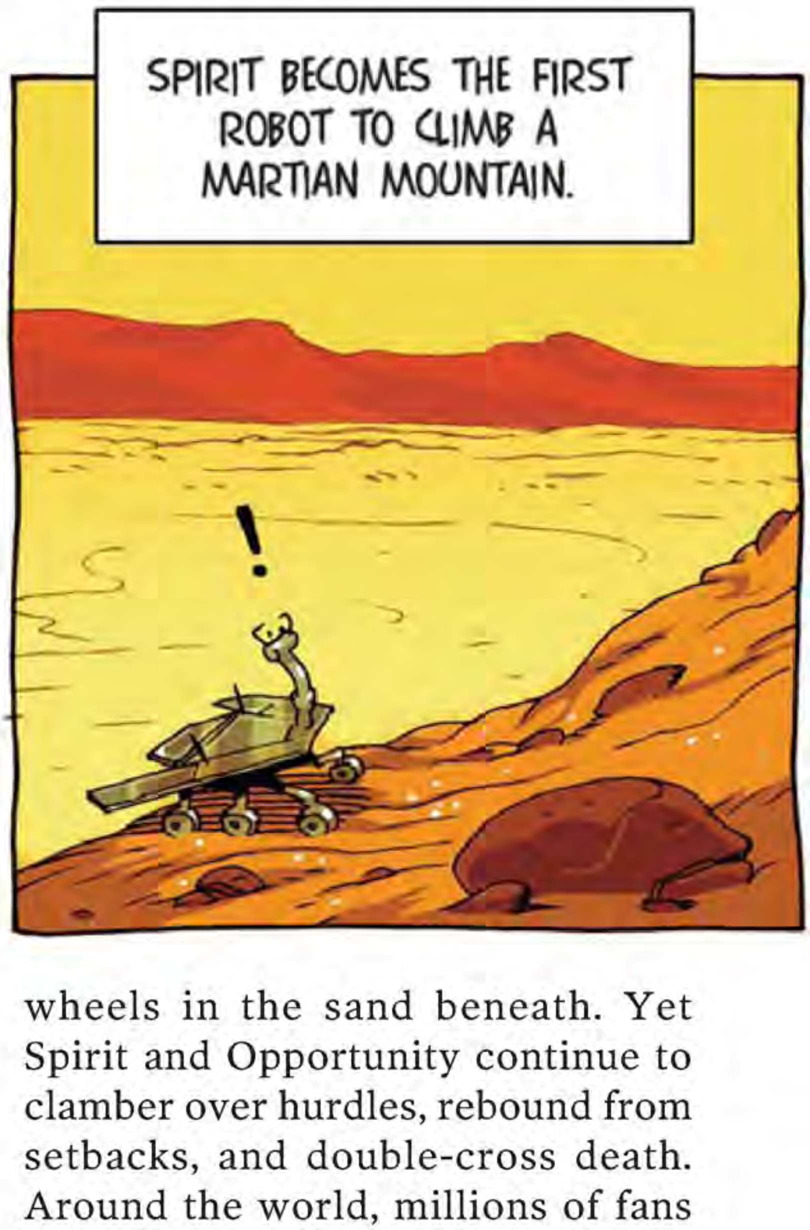


The mood at the news conference was somber. For nine months, the Mars Exploration Rover known as Spirit had been stuck in a sand pit on the rim of a shallow crater. The mission team had tried its best to free the robot, a NASA official told reporters, but now it was time to face reality: Her current location would likely be her "final resting place." After six years of roaming the Red Planet, the intrepid explorer was being redesignated a "stationary research platform."

The very next day, January 27, 2010, Spirit began edging, inch by inch, toward solid ground. Media reports of the rover's death, quipped the mission's lead scientist, Steve Squyres, were "greatly exaggerated."

Spirit and her identical twin, Opportunity, have been defying the odds ever since they landed on Mars in January 2004. When they first rolled off across the rust-colored landscape at a leisurely one and a half feet per minute, the hope was they would make it through their three-month mission. This spring, they were on track to break the endurance record held by the stationary probe Viking I, which stopped communicating with Earth in 1982 after six years and 116 days. The golf-cart-size rovers have traveled more than 17 miles, beamed back some 260,000 images, and inspected at great length hundreds of rocks and patches of soil. In the process, they have given us our most intimate view yet of the desolate planet and provided conclusive evidence that water once flowed there.

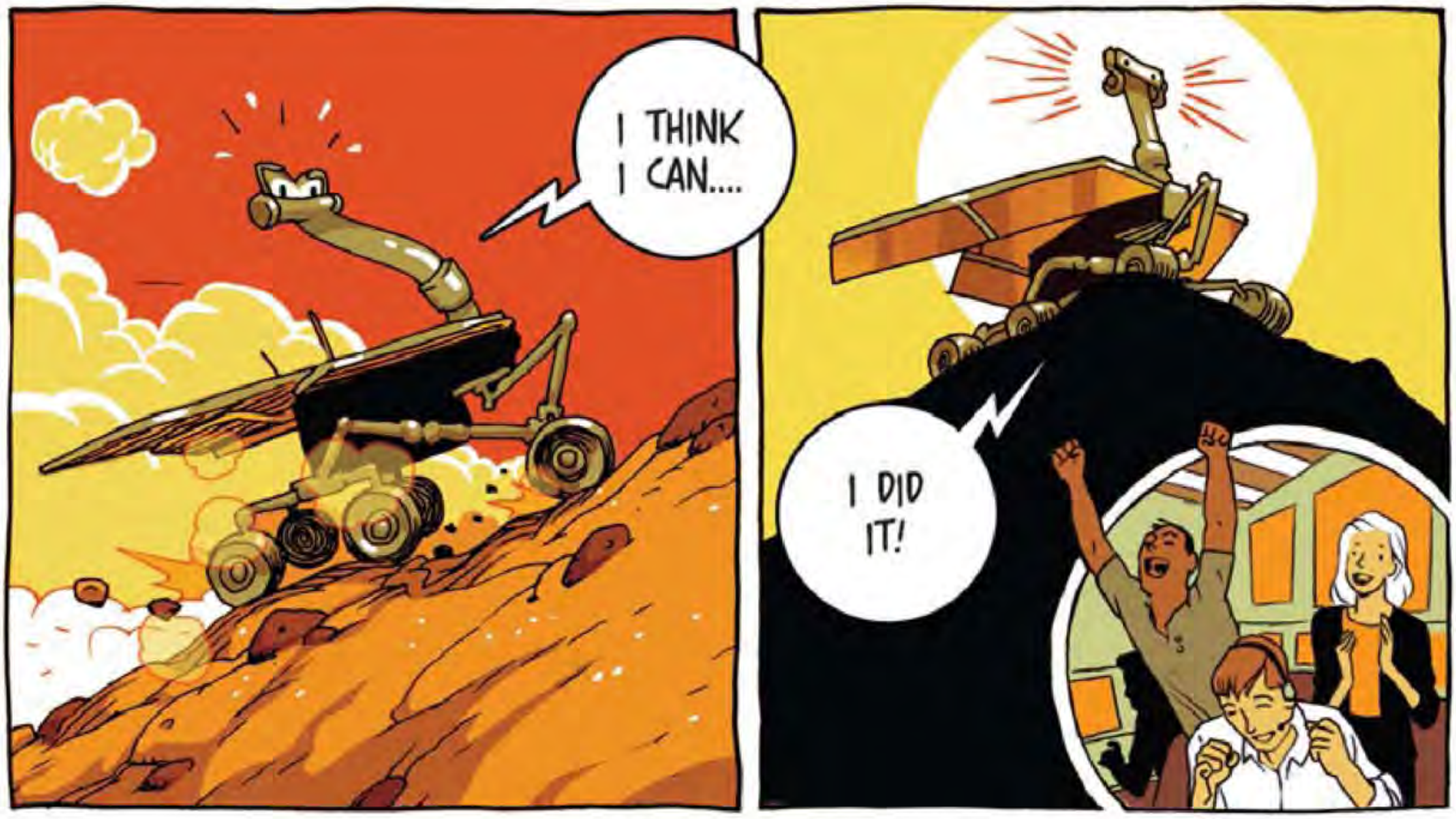
Surviving on Mars isn't easy. Temperatures can swing 100 degrees in a single day, stressing delicate machine parts. Weeks-long dust storms coat instruments and solar panels with powder stirred up from the planet's surface. Solid-looking terrain sometimes crumbles, trapping



wheels in the sand beneath. Yet Spirit and Opportunity continue to clamber over hurdles, rebound from setbacks, and double-cross death. Around the world, millions of fans have followed the unfolding drama on the Internet.

Of course, Spirit and Opportunity are made of steel, aluminum, and composite materials and are incapable of

expressing traits like courage and persistence. So it may be surprising to learn that even scientists and engineers who work with the rovers often speak of them in human terms. "Some of us have really fallen in love with these girls," says Sharon Laubach, who until recently led the crew that commands the rovers. In fact, some team members describe the machines they contain the same hardware, software, and circuitry. The rovers were designed to do what field geologists would do—survey terrain, analyze rocks, and take pictures. So, says lead scientist Squyres, "we intentionally gave them humanlike features—'eyes' with twenty-twenty stereoscopic vision, arms to reach out and touch things."



as having two distinct—and not always harmonious—personalities.

Sketched into existence in 2000 by engineers at NASA's Jet Propulsion Laboratory in Pasadena, California, Spirit and Opportunity are two of a kind. Five feet tall and five feet long, a little over seven feet wide, and weighing in at a stout 384 pounds,

But as individuals, the siblings were shaped by their life experiences—and their paths split from the start. Because key systems on Spirit were completed first, she underwent testing before her sister to identify bugs and determine fixes; Squyres refers to her as the "troublesome firstborn." Opportunity benefited from her sister's trials and errors.

On Mars, their differences became more pronounced. Spirit arrived first, entering the atmosphere at some 12,000 mph, bouncing to a standstill upon landing, emerging from her protective casing, and ultimately heading off to explore the rugged terrain of Gusev Crater. Three weeks after her sister touched down, Opportunity landed on the other side of the planet, on a gentler piece of real estate known as Meridiani Planum. "We sent them to very different places, and we used them in different ways," says Squyres. "That caused their personalities to diverge significantly."

Gusev is hillier, rockier, dustier, windier, and colder than Meridiani. "Spirit has had to fight for every gain," says former chief engineer Jake Matijevic. "It's made her tough and perhaps a bit willful." Team members have affectionately dubbed her a drama queen. Just before Opportunity's arrival, for example, Spirit threw a tantrum, rebooting herself about 120 times. In the process, she developed a kind of cyber-insomnia—she couldn't go into sleep mode—which sapped her energy reserves. It took over a week to diagnose and repair the glitch.

"Since then, it seems like every time the team's focus shifts to Opportunity, Spirit acts up," observes Laubach. "It has to be coincidence or engineering issues, but it's really weird."

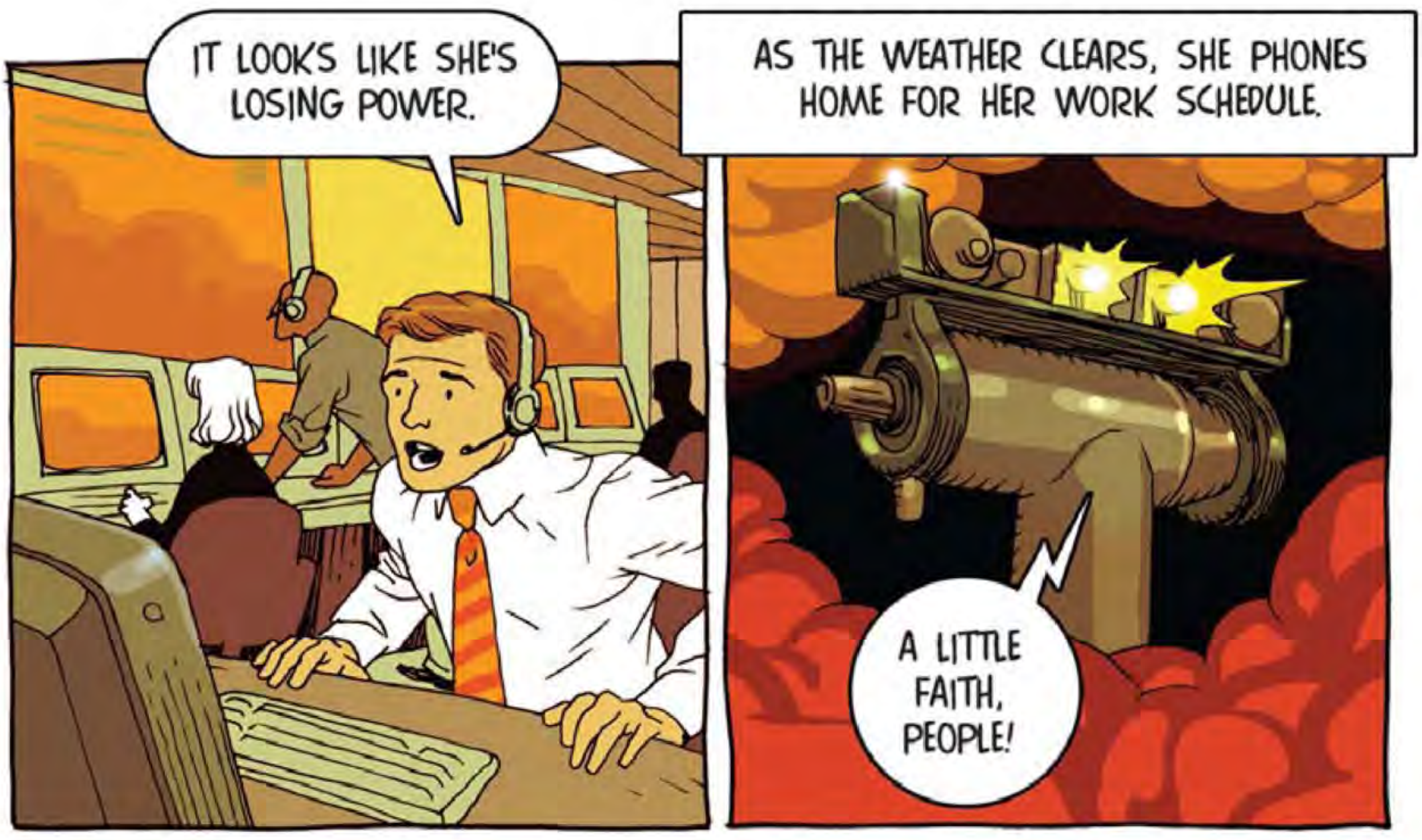
Opportunity landed inside a small crater, where rolling about was easier and the scientific pickings were richer. The moment she opened her eyes, she started beaming back images of layered bedrock, which helped prove that water had once run over and beneath the surface. "She's the honor student, the go-getter, the overachiever, always trying to please us," says Laubach. The team members call her Little Miss Perfect.

Spirit and Opportunity do share certain traits—most notably, a failure-is-not-an-option resolve, a systematic approach to problem solving, and an ability to question authority. They follow commands dutifully, says project manager John Callas—"unless we tell them to do something stupid. Then they stop and ask, 'Are you sure?'" The rovers are capable of determining the quickest and safest route to a destination on their own.



When Spirit began to scale the Columbia Hills range in 2004, inching her way up the rocky slopes for 14 grueling months, no one could be certain that she'd make it. Yet in September 2005, she became the first robot to climb a Martian mountain when she reached the summit of 270-foot Husband Hill. And when her right front wheel stopped working in March 2006, she just turned around and roved backward, valiantly dragging her disabled wheel, as she has done ever since. Opportunity, for her part, proved her tenacity in June 2005, pulling herself out of a sand dune where she'd been stuck up to her axles for six weeks. She caught the brunt of a global dust storm in 2007, enduring a potentially lethal combination of low power and destructive grit. But she hung in, and as soon as the weather cleared, she phoned home for her work schedule.

These life-or-death struggles have brought some sleepless nights to the mission team members and have been avidly followed by a global network of well-wishers. Ray Arvidson, the mission's deputy chief scientist, was on a business trip to China's Shandong province when the 2007 storm was at its height. A man approached him and, through an interpreter, asked what had brought Arvidson to the country. "When he heard I work on the rovers," Arvidson recalls, "he said in halting English, 'I worry about them, and if they are going to survive.' It made me feel good that the rovers had been embraced worldwide."



Within days of the news conference designating her a stationary research platform, Spirit had scrabbled almost 12 inches—nearly enough to pop out of her sand trap. By then, the dark Martian winter was setting in, a time when the solar-powered robots operate with a reduced workload in order to conserve energy. As winter begins to lift later this year, Opportunity will gradually resume normal activity, and Spirit's handlers hope she will finish extricating herself from the sand trap. "We're making plans as if that's going to be the case," Matijevic says.

Thanks to the rovers, and more than six years of their hard work, Mars exploration is a bigger-than-ever focus for space programs around the



Father of the Rovers

As principal investigator for the Mars Exploration Rover mission, Steve Squyres headed the team that designed the science payload that Spirit and Opportunity carry and oversees the research. Here he shares his reflections:

"Spirit and Opportunity are pieces of wire and metal and silicon. There's nothing 'alive' about them, but it's not hard to identify with these two little things far from home, struggling to survive. That says more about us as humans than it says about the rovers, but it's impossible not to get our emotions wrapped up in what's happening. We've all come to feel very deeply for them. They've become much more than buckets of bolts.

"For me, it's been a 23-year roller coaster. I spent ten years writing proposals before NASA finally said yes, and then seven years working with engineers and scientists to create the rovers. I held pieces of them in my hands, crawled underneath them, and invested in them so many hopes and dreams. And for more than six years, I've gotten up every morning and gone to work to operate rovers on Mars.

"We have survived so many near-disasters, and Spirit and Opportunity have gone far beyond our wildest imagination. Yet we've always known that they are not immortal. When they die, we'll all feel loss and emptiness. But these will be honorable deaths, like a friend who dies at the age of 110 after leading a long, productive, and joyful life—you're sad, but damn, how they lived." *A. J. S. R.*

world. Supporters point out that the effort has cost only $900 million, providing an impressive amount of scientific bang for the buck. That has encouraged mission planners everywhere. Another U.S. rover, Curiosity, is scheduled to launch in 2011. In the coming decade, Russia will be collaborating with China and Finland and NASA will team up with the European Space Agency to send rovers, stationary landers, and vehicles capable of returning to Earth with Martian rocks and soil.

No one can say when Spirit and Opportunity will finally roll to a much-deserved rest. All of us, though, will have benefited from their mission. "They have turned science fiction into fact and taken people to a place they will never have a chance to see in any other fashion in their lifetime," says Matijevic. While deepening our understanding of the universe, these robots have set a sterling example of pioneering enterprise.

They've also taught us something about ourselves. In an era when we tend to focus on the shortcomings of our institutions and inventions—partisan gridlock! sudden acceleration!—Spirit and Opportunity remind us that skilled and dedicated earthlings, working together, can still accomplish something cosmically great. More than 4,000 people have done their part to help make the Mars Exploration Rover mission a success. Says Squyres, "An important part of the rovers' legacy, I hope, will be inspiration for the next generation to build spacecraft and leave the solar system to explore and discover."

The Rovers' Greatest Hits

Since landing on Mars in January 2004, Spirit and Opportunity have:

- Discovered layered bedrock, rippled sediment, and minerals that form only in the presence of water.
- Found traces of ancient seas, hot springs, and volcanic steam vents, which may have once been capable of supporting life.
- Confirmed long-debated theories that Mars used to be warmer and more Earth-like than it is today.
- Provided crucial engineering and scientific data for future missions to Mars—including, someday, visits by human explorers.

HOG WILD

Overheard at a motorcycle dealership:

Customer: I want to add something useful to my bike, but I can't think of what to get.

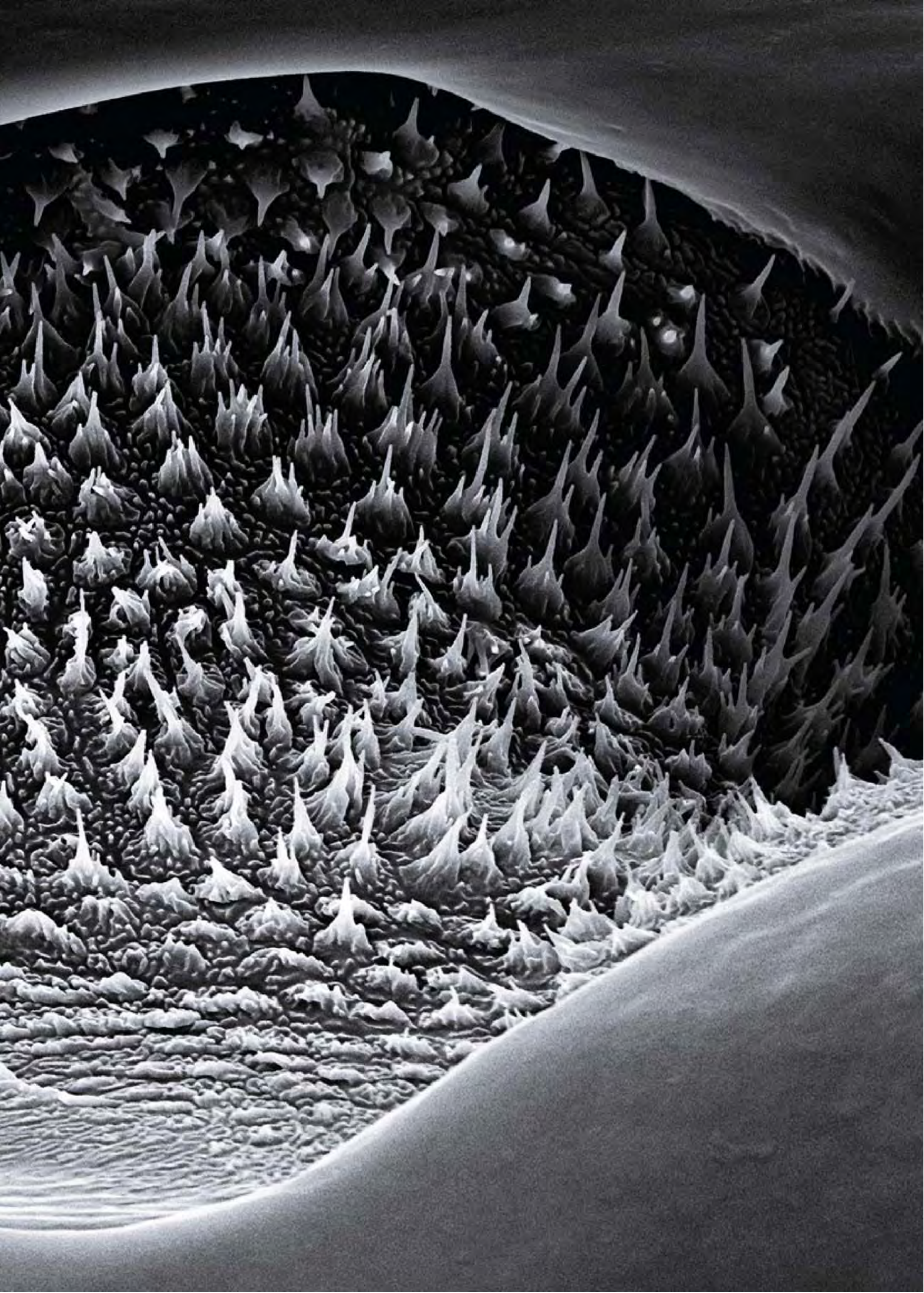
Clerk: How about a radio? You can talk to your wife while you ride.

Customer: If I'd wanted that, I'd take the car. *Jamie Lawless*

Look>>

SEE THE WORLD DIFFERENTLY









«Twice

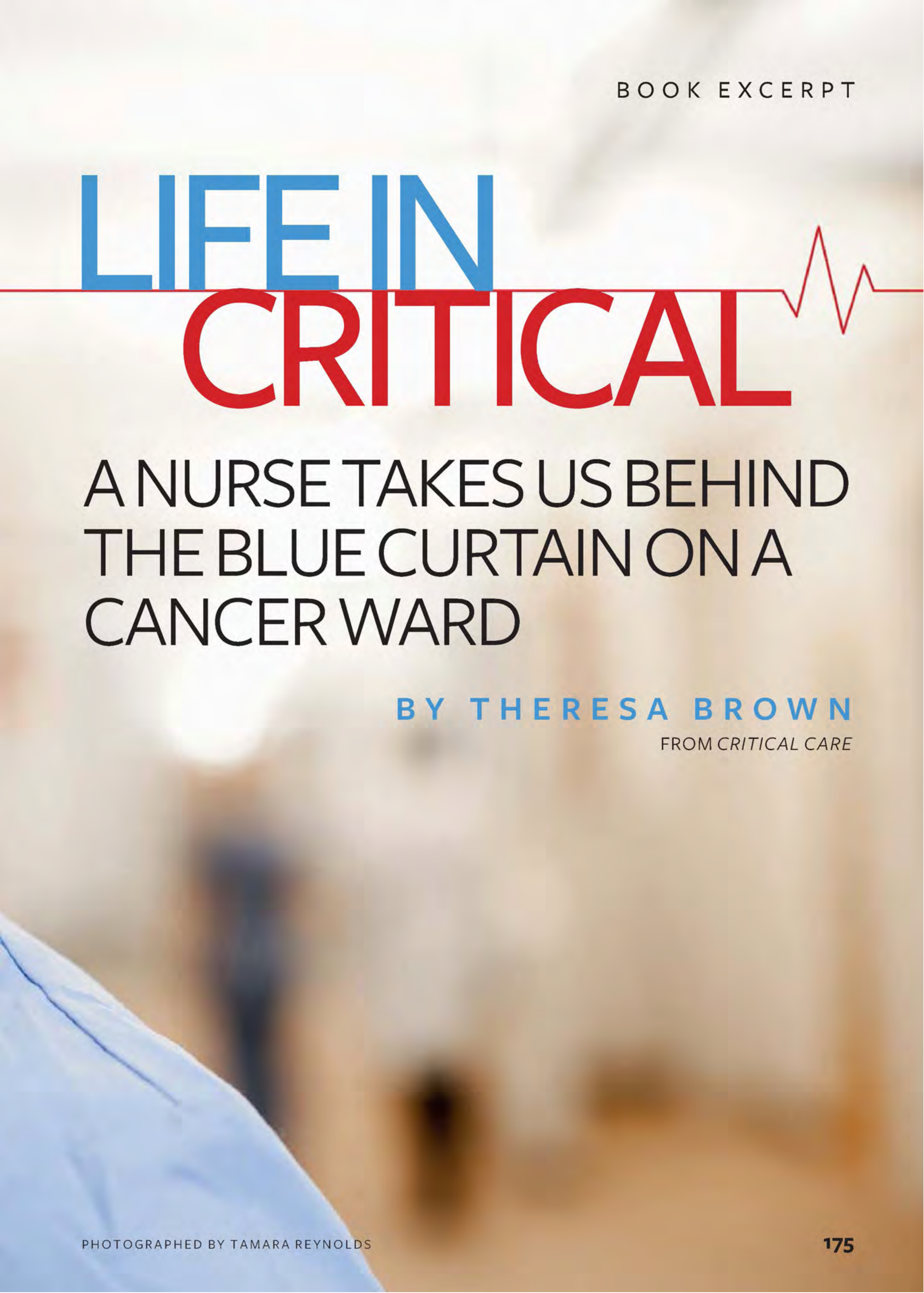
To the naked eye, the goggle-eyed bee appears faintly comical, a fuzzy pom-pom in striped pajamas. But under a microscope, a single bee wing magnified 550 times (see previous spread) resembles something more mysterious—a remote and wooded island.

Bees, however, are anything but solitary. A swarm of them toiling on an empire of honey and wax appears frenetic but is actually a model of civilized ambition. Female worker bees turn nectar into honey by rapidly beating their four wings—sometimes up to 230 times per second—in a flurry that also creates their buzz.

BEE, PHOTOGRAPHS BY ROSE-LYNN FISHER (PRINCETON ARCHITECTURAL PRESS, $29.95)



Scrubs: Every day holds hope, fear, courage, and even laughter for the author.



LIFE IN CRITICAL

A NURSE TAKES US BEHIND THE BLUE CURTAIN ON A CANCER WARD

BY THERESA BROWN

FROM *CRITICAL CARE*

PHOTOGRAPHED BY TAMARA REYNOLDS

After the birth of her first child, Theresa Brown, who taught English at Tufts University, yearned for work that was hands-on in a caring profession. A few years later, impressed by the midwife who helped deliver her twins, Brown finally decided to make a change. She went back to school and, when the twins were eight, earned a bachelor's degree in nursing; a few months later, she passed a rigorous licensing exam and became an RN. Here, Brown, who says she wouldn't trade the chaos of the hospital for the perfect classroom, chronicles one of her early days on a cancer floor in Pittsburgh.

Four patients is a standard assignment for a day shift on my floor. This day, my patients were Peter, Marlo, Tom, and Dorothy.* Each had some type of blood cancer.

I knew Peter well: He was in his mid-20s, had just finished another round of chemo, and was ready to be discharged that afternoon. Marlo, 63, had a bone marrow biopsy scheduled for that afternoon. Tom, in his mid-30s, had leukemia that had spread to his central nervous system. Dorothy, 50, was a scheduled admission, getting follow-up chemo. She was receiving narcotics for chronic back pain that her lymphoma had exacerbated.

I learned all these details and more from the night shift. "Tom will keep you running," the night nurse said. "He'll ask you for a cup, and then he'll ask you for ice, and then he'll ask you for ginger ale."

"Got it," I said. Tom managed his fears by making requests, and my job was to help him do that while keeping his demands on my time under control.

In my mind, I rank my patients in terms of least to most work-intensive. First came Dorothy. She would probably require additional narcotics, but her chemo wasn't scheduled until after my shift. Marlo was second. Her biopsy might keep me busy when it happened, but until then she would not need much from me. Next came Peter, very stable, but requiring all the administrative work that went into a discharge. My wild card was Tom. I already knew that he was anxious. He was also very, very sick. His heart was racing ("tachy"), and he was having such a hard time breathing that he needed oxygen.

I checked my watch after picking up my papers: 7:30. At my med cart computer, I looked up my patients' vital signs, morning labs, medications, and orders, and wrote down most of this so I'd have it at a glance.

I was deciding which patient to see

first when Tom's call light came on. I went into his room. "Hi. I'm Theresa," I said. "I'll be your nurse today." I worried, not for the first time, that my enthusiasm combined with my white uniform made me come across more like a cruise director than a nurse. If Tom had any misgivings about my role, he kept them to himself: "Bathroom," he said. He was skinny, bald from chemo, and very pale. I helped him sit up on the edge of the bed, and that small bit of exertion left him breathless. Standing was difficult for him, pivoting to the toilet draining to an extreme.

"Do you feel anxious," I asked him, "or is it hard to breathe?"

"Hardtobreathe," he said, all one word in a rush.

Right then, transport called, saying they were on the floor to take Dorothy to a CT scan. I hadn't yet seen Dorothy, and she needed her morning pain meds, her insulin, and antinausea medication before she went. Tom would need help getting off the commode and back into bed. If transport had to wait too long, they'd leave without the patient, meaning I would have to start the whole process all over again and probably get an angry call from CT.

"Tom," I said, "I'm going to give you a little more time," and I left his room to go into Dorothy's.

"Hi. I'm Theresa," I told Dorothy. "I'm your nurse." I quickly wrote my name on the whiteboard in her room.

"Transport is here to take you to CT," I said. "Let me just run and get your insulin and OxyContin."

The transporter called me again. There was some hang-up at the nurses' station about getting the right papers to print, which bought me a little time. I grabbed an aide, and together we helped Tom back into bed. I got Dorothy's narcotic from the locked cabinet, drew up her insulin, and settled her in a wheelchair. "I'll see you when you get back, Dorothy," I called as the transporter took her.

Now Tom's breathing was better, but he wanted his shades opened in front of one window, not the other, and slanted at a particular angle. Then he had a medication question. I had already taken his 20 morning pills out of their individual packages in front of him, but he wanted to make sure he got the brand name of two medications. "I'm allergic to the generic," he said.

I went to see Marlo, a personable lady with a huge, friendly smile and a sad history of relapses.

*The names and other identifying details of patients and staff have been changed to protect their privacy.

I called the hospital pharmacy and was relieved to discover that he had not gotten the generic—but the brand-name drugs hadn't been ordered either. Hmm. I wasn't quite sure what to make of that. While thinking it over, I went to see Peter. He needed IV antibiotics and magnesium before his discharge. Peter liked to sleep late, so I got his 9 a.m. meds ready, checked his IV line, then headed back to Tom.

"Tom, Coreg and Zocor aren't even ordered for you," I told him.

"I know," he said. "I have my own here with me."

Okay, I thought, I get it: Worry aloud about a nonexistent problem, then parlay that worry into a new problem. "They're in that bag," he said, gesturing toward a collection of ziplock bags on the chair. I went over and picked one up. "No, not that one. The other one," he directed. I picked up a different one. "No, the other one," he said more emphatically.

I picked up a third bag, rifled through it, and found a collection of pills ... that did not include Coreg and Zocor. "They aren't here," I said.

"But I need them," Tom said.

I finally found the pills in another ziplock bag that was inside a fifth bag. However, it's bad practice to allow patients to bring their own medications to the hospital and take them at will. I paged the intern for guidance.

While I waited for him to call back, I got out morning meds for Marlo. The intern decided Tom could have the Coreg and Zocor, so I gave him the specified doses. Then Tom insisted I keep the bottles with me. I figured we had a policy on whether nurses could hold on to a patient's own medications, but I didn't know what it was, so I took the pills for the moment, telling Tom I'd have to find out. I asked if he was doing okay for now and was very surprised when he said yes.

Next I went to see Marlo, a personable lady with a huge, friendly smile and a sad history of relapses. The bone marrow biopsy scheduled for that afternoon would tell her whether there were any signs of disease left after her most recent chemo.

I administered her morning medications, then checked her IV fluids. While I did my assessment—looked in her mouth, listened to her heart and lungs, checked her belly and pulses—her anxiety about the biopsy became more and more evident. I tried to reassure her by telling her we could sedate her with IV Ativan. It can be tricky bringing up antianxiety drugs because some patients get insulted, but Marlo jumped on the suggestion. "Yes!" she said. As I walked out the door, she made it clear that she was counting on me.

At 9:30, I made notes in the computer that I had seen both Peter and Dorothy and would do a full assessment later. I got Peter to swallow some nasty-tasting medicine, and then Tom's call light went on.

"Bathroom again," he said. I helped him to the commode, and when it was

time to get him back in bed, he was so winded that I needed to turn his oxygen up to five liters from three. Once there, he sat straight up, gasping. I had time to wait, and I wanted to see how he would do if I turned his oxygen back down. "Does that feel all right?" I asked.

He nodded and lay back against the pillows. Then he asked, "Are you keeping the Coreg and the Zocor?"

"Oops!" I said. "Let me find out."

At that moment, the team came to do rounds: the attending MD, the fellow, the resident, the intern, and the pharm D, or doctor of pharmacy. The pharm D, Gayatri, a tall, beautiful woman, already knew about the Coreg and Zocor. "Patients can't just take their own drugs," she said. "The intern doesn't know." She frowned. "I have to find out about this." Then she said, "We also have questions about the tobra [tobramycin] level."

Tobramycin is a powerful antibiotic, but too strong a concentration can cause toxic side effects. For this reason, we draw blood samples in case we need to make an adjustment. Gayatri wanted Tom's trough—or lowest concentration—drawn at 11:30, the drug readministered at noon, and the peak level drawn at 12:30. It sounded simple, but nurses on my floor can collect blood for labs only if the patient has a permanent, or "central," IV line. Tom didn't have one, so his blood would have to be drawn by a phlebotomist, and even if I told her the lab was stat—meaning it was needed right away—she would come on her schedule, not mine.

Gayatri and I finished our conversation right when the attending MD came out of Tom's room. I liked Dr. Girlitz, but with him conversations were always fast and furious. "He's using these accessory muscles," Dr. Girlitz said, running his fingers up and down his own neck. "If that doesn't stop, he's going to code."

"What?!" I wanted to shout. "Do you mean that?" But instead I said, "Yes, when I helped him to the commode, he became tachypneic."

"What were his O_2 sats?" he asked, referring to oxygen saturation.

"Mid-90s the whole time." Trying to be helpful, I added, "And it really is shortness of breath; it's not anxiety."

"Yes, yes," he said, impatient, "because he's using these accessory muscles." Then the team moved on.

I went to a more experienced nurse. "Dr. Girlitz just said that if Tom's breathing doesn't improve, he's going to code. I love it when doctors say things like that," I told her, trying to

"If that doesn't stop, he's going to code," the doctor said. "What?!" I wanted to shout. "Do you mean that?"

relieve my worry with sarcasm. "It really gives a shine to the day."

This nurse, Karen, had very expressive eyebrows, and she raised them. "Maybe you could send Tom to the ICU now instead of waiting for that to happen," she said.

"Great idea!" I said. But I needed a doctor to give the order.

Time passed. Gayatri told me that although Tom could take Coreg and Zocor, he needed to keep his own pills with him. Peter woke up and took the rest of his medications. Dorothy came back from her scan, and I gave her a good look and listen. I also did some charting on the computer. The rule is, If it isn't charted, it isn't done, so nurses are motivated to protect themselves legally.

Then Dr. Arable, the infectious disease specialist, came to see Tom. When I first started at the hospital, I found Dr. Arable reserved to the point of forbidding. Over time, I saw his more human side, his commitment to the patients, his wicked sense of humor. "How's Tom?" I asked.

Dr. Arable made a wry grimace. "Oh, he's just taching away in there," he said, meaning that Tom's heart rate was stuck in the 120s. "I think he might be unit bound."

Here was the opportunity Karen had suggested I look for. "Would it be a good idea to do that sooner rather than later?" I asked.

Dr. Arable considered and then said, "I don't think that would be such a bad idea."

"Are you willing to go on the record with that?"

He thought about it again. "Yeah," he said, "let me wander across the hall and see if I can find the team and talk it over with them." He paused. "I just don't want to walk into his room and find him dead."

"Um, yeah," I said. "That would be a big bummer." *Bummer* really was not the right word here, but I did not want to walk into Tom's room and find him dead, either—a prospect I hadn't even considered until then.

Five minutes later, Dr. Arable came back and told me he could not find the team but that he did think Tom should go to the ICU. Now it was my turn to swing into action. The appropriate thing was to call the intern, but I had enough experience to know that talking to him would most likely be fruitless, so I paged the fellow, Sujata. She said the transfer was fine with her if Dr. Arable recommended it, but she was in clinic and couldn't come to see the patient. I had no option but to page the intern, multiple times.

Before I left Tom in the ICU, I took his hand and said, "Short stay probably. They'll get you more stable."

Finally, he came and, somewhat coached by me, spoke with the intensivist, Dr. Sutherland, who aggressively guards access to the ICU. They were on the phone for almost ten minutes, an eternity in the hospital, but the transfer was approved.

Now I needed to get Tom caught up on his drugs and move him. Two more-senior nurses, including Karen, stepped in. "Theresa, do you need help?" they asked. I think I had a deer-in-the-headlights look on my face, and I mumbled, "Uh-huh," followed by lots of effusive thank-yous. I gave Tom his noon pills and his IV steroids while the other two nurses hooked him up to an oxygen tank and piled his belongings on top of his bed and in a wheelchair. The phlebotomist still had not drawn the tobramycin trough even though it was now 12:30, an hour late, so I left a message saying the patient was going to the ICU and could she draw it there?

Together, the three of us got Tom rolling. In the next five minutes, my portable phone rang three times. The first call was the phlebotomist saying she had been at lunch and could the ICU nurse draw the tobra levels? I wanted to say, "Lunch? You get a lunch?" but instead I just told her okay. The second call was the pharmacy telling me Dorothy's chemo would be delayed. The third call came as we were guiding Tom's bed, with the oxygen tank and his IV pole, onto the elevator. It was Jack, the ICU nurse, saying he couldn't find my tape-recorded report. "We're just getting into the elevator," I told him, "but I did tape."

We were navigating Tom off the elevator when my phone rang again. Jack still couldn't find my report. "I will be there in less than five minutes," I said. Finally, we got to the ICU, and Jack said, "You must have put the wrong room number on the report."

Peter had given me a gift: He had allowed me to be a regular human being. Not his nurse, but a person.

This is the kind of comment that, if I were a cartoon character, would make steam come out of my ears. I bit back a "No, I did not put in the wrong room number," and asked, "What would you like me to do?"

"Oh, I can look up the history," he said in a much friendlier way. Now I was confused. Was he just giving me a hard time because he could?

Before I left Tom, who had not wanted to go to the ICU, I took his hand and said, "Short stay probably. They'll get you more stable, and then you can come back to us."

Then I explained to Jack—three times, in detail—about the tobramy-

cin levels. I also told him, on my own authority, to hold off on giving more tobra until he had drawn the trough.

Back on the floor, I called Gayatri, the pharm D, and told her that Tom had gone to the ICU, that I had explained about the tobra and delayed the next dose. "Oh, yes," she said, "it's okay to hold it." I gave a big internal sigh of relief: It's not really my call, as a nurse, to hold an antibiotic, but it had seemed like the right thing to do.

Around this time, I ate something for lunch while joking that one way to reduce your patient load was to send people to the ICU. My phone didn't ring once during the 15 minutes I was eating, and I was glad for the serendipitous break. However, right as I finished, the secretary found me and chided me for not having my phone on. The battery had died, and I had missed three calls.

It was now 2 p.m., and the medicines Peter needed for his discharge were being sent from two different pharmacies due to the requirements of his insurance. I also needed to complete, print out, double-check, and sign his instructions.

Marlo was growing increasingly worried as the biopsy approached. Pretty much everyone who has a bone marrow biopsy dreads the procedure. It is done at the bedside under a sterile drape. The fellow or nurse-practitioner inserts a long needle into the hip bone and pulls out a "core" of tissue. Although the skin is numbed,

the bone cannot be anesthetized, and patients feel the needle going in, then turning to extract the sample, and pulling out. Sometimes it takes more than one try. I drew up Marlo's IV Ativan and went to administer it. Sonya, the fellow who would perform the procedure, was in the room. In her quiet voice, Marlo said, "You know, the last time, they didn't give me anything, and it was terrible."

"No, that's ridiculous," I said. "You just need to get hooked up with the right people, Marlo."

She, Sonya, and I all laughed. Marlo was relieved to have told her story, and I was able to understand her extreme anxiety: Having a bone marrow biopsy without pain or anxiety medication would leave a patient very fearful for the next time.

I gave her 1 milligram of Ativan, and another 0.5 milligrams 30 minutes later. Since Marlo had three people in the room, including her sister, I knew she wouldn't feel alone when I left to discharge Peter.

First, Peter insisted on playing me some Springsteen on his laptop. I had confessed to him that I did not like "Born in the U.S.A.," so Peter wanted me to hear some early Springsteen and then a song from his album *Magic*. This new song I liked, and I stayed in his room the entire seven minutes listening to both songs. When the music finished, I realized that Peter had given me a tremendous gift: He had allowed me to be a regular human being. Not his nurse—his pill giver, paper distributor, and vitals taker—but a person, maybe like the mother he had already lost to cancer, maybe even a little bit like a friend. I hugged him and said what we always say to patients when they leave: "I hope I don't see you for a long, long time."

During my eight hours, I tried to help. For our patients, there may not be a tomorrow; today has to count.

Marlo seemed miserable whenever I checked on her during the procedure, but when it was over, she smiled tentatively and said, "I think I'm okay." I got Dorothy caught up and went to pick up papers for the transfer I was getting from the ICU. This patient was going into Tom's old room, and I joked with my boss about musical chairs. Marlo's biopsy site bled onto her sweatpants—not an amount to worry about, but she needed to get cleaned up.

As the end of my shift, 3:30, came and went, I finished typing Marlo's vitals into the computer. "Theresa, you're still here?" people asked.

"Yeah, yeah, I'm leaving." I realized I hadn't told Jack, the ICU nurse, about Tom's Coreg and Zocor, so I called

him. He once again mentioned the missing report, but at the end of our conversation, he also said, "Thanks for all your help." When I was finally done, I changed my shoes, got my bag out of my locker, and swiped out.

Dr. Arable stepped onto the elevator with me. "Good job getting that tobra level," he said. "It doesn't get done right very often." And suddenly, the whole day seemed worth it—I had been effective.

Because here's the truth: These four patients are all now dead.

Tom went first, dying from acute respiratory failure just a couple of weeks later. Peter died of septic shock a few months after that. I took his death hard: He would never see 30. Dorothy was sailing along when one complication after another hit her like tidal waves. By the time she died, she had so many things wrong with her that I'm not sure what actually killed her. And in the end, Marlo's chemo had irreparably damaged her heart. So, a sincere compliment, a brief sampling of good Springsteen, my first successful transfer to the ICU, a few shared jokes—and at the end of my shift, my patients were still alive. During my eight hours, I had tried to help in whatever way I could. For our patients, there may not be a tomorrow; today has to count. At the end of the shift, I went home, saw my kids, ate dinner, slept, and showed up at 7 a.m. the next day, ready to do it all over again. Another day on the floor.

ALLOW US TO CLARIFY

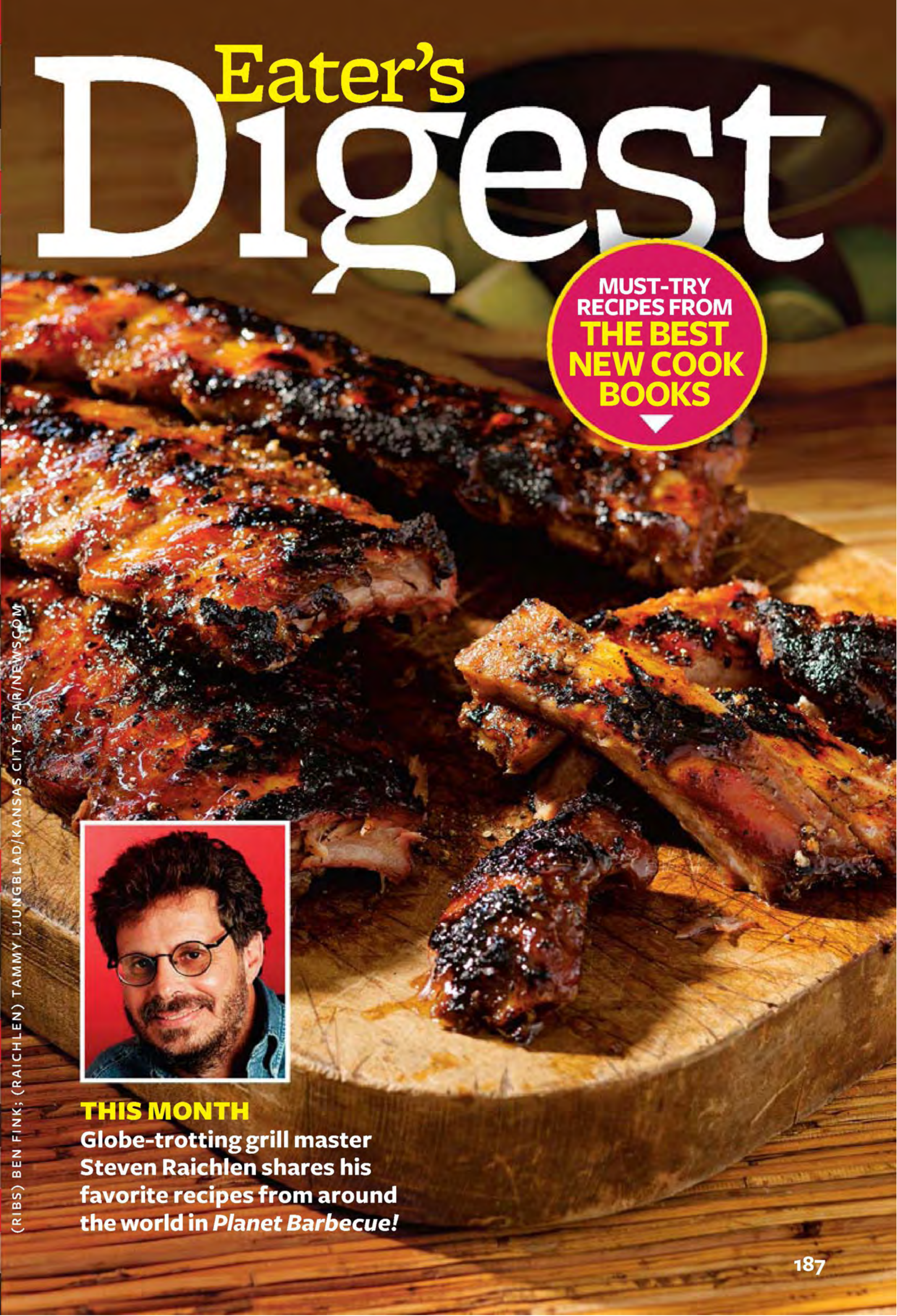
To err is human, to admit it—a newspaper.

From the *Birmingham* (Alabama) *News*: "Corrections & Clarifications: A recipe for Italian Breaded Chicken Parmesan on Page 2G of Wednesday's Food section suggested beating the chicken with a small mallard. That, of course, is incorrect. A mallet would be a better choice."

Submitted by *Tim Norris*



From the (Australia) *Advertiser*: An incorrect Thought for the Day was published yesterday. It should have read: "Lord God, you lead me along good and right paths in life." Here's what was published: "This is the thought of the day and this is where you put the thought of the day as if anyone has a thought for the day. And can't work out what the hell is going on. But who knows what is happeningishness."



Eater's Digest

MUST-TRY RECIPES FROM **THE BEST NEW COOK BOOKS**

THIS MONTH

Globe-trotting grill master Steven Raichlen shares his favorite recipes from around the world in *Planet Barbecue!*

(RIBS) BEN FINK; (RAICHLEN) TAMMY LJUNGBLAD/KANSAS CITY STAR/NEWSCOM

SHOWN ON PREVIOUS PAGE

Ginger, Garlic, and Honey Grilled Baby Back Ribs *Makes 4 servings*

A mix of Asian seasonings gives these ribs intense flavor.

For the ribs and spice paste

- **4 racks true baby back ribs (each ¾ to 1 lb.) or 2 racks American baby back ribs (each 2 to 2½ lbs.)**
- **6 cloves garlic, coarsely chopped**
- **1 piece (2 in.) fresh ginger, peeled and coarsely chopped**
- **1 tbs. sugar**
- **1 tbs. coarse salt (kosher or sea)**
- **2 tsp. freshly ground black pepper**
- **2 tbs. honey**
- **1 tbs. soy sauce**
- **1 tbs. Asian fish sauce or additional soy sauce**

For the dipping sauce

- **4 tsp. coarse salt (kosher or sea)**
- **4 tsp. white pepper**
- **4 juicy limes, cut in half**

1. Prepare ribs and spice paste: If necessary, remove thin, papery membrane from back of each rack of ribs (some stores sell baby backs with membrane removed). If using larger racks of ribs, cut each rack in half. Place ribs in nonreactive baking dish just large enough to hold them in single layer.

2. Place garlic, ginger, sugar, 1 tbs. salt, and black pepper in mortar and pound to paste with pestle. If you do not have a mortar and pestle, purée ingredients in food processor. Work in honey, soy sauce, and fish sauce or additional soy sauce. Spread spice paste over ribs on both sides. Let ribs marinate in refrigerator, covered, 1 to 4 hours.

3. Prepare ingredients for dipping sauce: Place 1 tsp. salt and 1 tsp. white pepper in neat mounds side by side in each of 4 tiny bowls. Place 2 lime halves next to each bowl.

4. Preheat grill to medium. When ready to cook, brush grill grate clean and apply thin coat of oil to grate. Place ribs, bone side down, on hot grate and grill until golden brown and cooked through, 8 to 12 minutes per side, a little longer for full-size ribs. If flare-ups occur, move ribs to another section of grill. When ribs are done, meat will have shrunk back from the ends of the bones by about ¼ inch.

5. Transfer racks of ribs to cutting board and cut into individual ribs, then arrange on platter or plates for serving. Just before eating, instruct guests to squeeze 1 to 2 tbs. lime juice into bowl of salt and white pepper and stir until mixed. Dip ribs in sauce before eating.

The Best Beef Satés in Singapore *Makes 4 servings*

These tiny, flame-seared beef kebabs (satés) are tender and spicy.

- **1½ lbs. rib eye steaks (about ½ in. thick)**
- **3 tbs. light brown sugar**
- **2 tbs. ground coriander**
- **1 tbs. ground turmeric**
- **1½ tsp. ground cumin**
- **1½ tsp. freshly ground black pepper**
- **3 tbs. Asian fish sauce or soy sauce**
- **3 tbs. vegetable oil**
- **Singapore Cucumber Relish and Fried Garlic Peanut Sauce (optional, recipes follow), for serving**

1. Cut steaks into ½-in. cubes (do not trim fat). Place in nonreactive mixing bowl. Stir in brown sugar, coriander, turmeric, cumin,

pepper, fish sauce or soy sauce, and oil. Let beef marinate in refrigerator, covered, at least 2 hours.

2. Drain beef cubes; discard marinade. Thread beef onto bamboo skewers, leaving bottom half of each skewer bare for a handle and ¼ in. exposed at pointed end. Satés can be prepared to this stage several hours ahead. Refrigerate, covered, until ready to grill.

3. Preheat grill to high. When ready to cook, brush grill grate clean and apply thin coat of oil. Arrange satés on hot grate, with piece of aluminum foil placed under exposed ends of skewers to keep from burning (fold foil in thirds, shiny side out). Grill satés until cooked to taste, 1 to 2 minutes per side for medium-rare, a little longer for medium. (Editor's note: Beef should be cooked to an internal temperature of 145°F.)

4. Serve satés with Singapore Cucumber Relish and Fried Garlic Peanut Sauce, if desired.



BEN FINK

Singapore Cucumber Relish

Makes 1 to 1½ cups

- **2 Kirby (pickling) cucumbers with seeds or 1 medium cucumber, cut in half lengthwise and seeded**
- **1 shallot, minced (2 to 3 tbs.), or 1 scallion, white and green parts, trimmed and minced**
- **1 small hot red chile, such as a bird or cayenne pepper, stemmed, seeded, and minced**
- **2 tbs. rice vinegar**
- **1 tbs. sugar**
- **Coarse salt (kosher or sea) and freshly ground black pepper**

Cut cucumbers into ¼-in. dice. Place cucumbers, shallot, chile, rice vinegar, and sugar into mixing bowl and toss gently to mix. Season with salt and pepper to taste. The relish can be made up to 2 hours ahead.

Fried Garlic Peanut Sauce

Makes about 2 cups

- **2 tbs. vegetable oil**
- **5 cloves garlic, 3 cloves thinly sliced crosswise and 2 cloves minced**
- **1 shallot, minced**
- **2 strips (each ½ in. by 2 in.) lemon zest**
- **1 to 3 small hot chiles, such as Thai chiles or serrano or jalapeño peppers, stemmed, seeded, and minced (for hotter sauce, leave in seeds)**

- ¾ cup peanut butter
- 1 cup unsweetened coconut milk
- 2 tbs. sugar, or more to taste
- 2 tbs. soy sauce
- 1 tsp. fish sauce (optional)
- 1 tsp. fresh lime juice, or more to taste
- 1 tbs. finely chopped cilantro
- Coarse salt (kosher or sea) and freshly ground pepper

1. Heat oil in wok or saucepan over medium-high heat. Add sliced garlic and cook, stirring, until golden, 2 minutes. Remove garlic with slotted spoon; place on paper towels to drain. Add minced garlic, shallot, lemon zest, and chile(s) to wok and cook over medium-high heat until fragrant and lightly browned, 2 minutes.
2. Stir in peanut butter, coconut milk, sugar, soy sauce, fish sauce, if using, lime juice, and ¾ cup water. Reduce heat and gently simmer sauce until thick but pourable, 5 to 8 minutes. Stir in cilantro during last 2 minutes of cooking.
3. Just before serving, stir in fried garlic. If sauce turns thick and pasty, add 1 tbs. or so of water. Add salt and pepper to taste and more sugar and lime juice if needed.

Coconut-Grilled Corn

Makes 4 servings

Grilled corn is a staple side dish, but Raichlen makes it the center of attention.

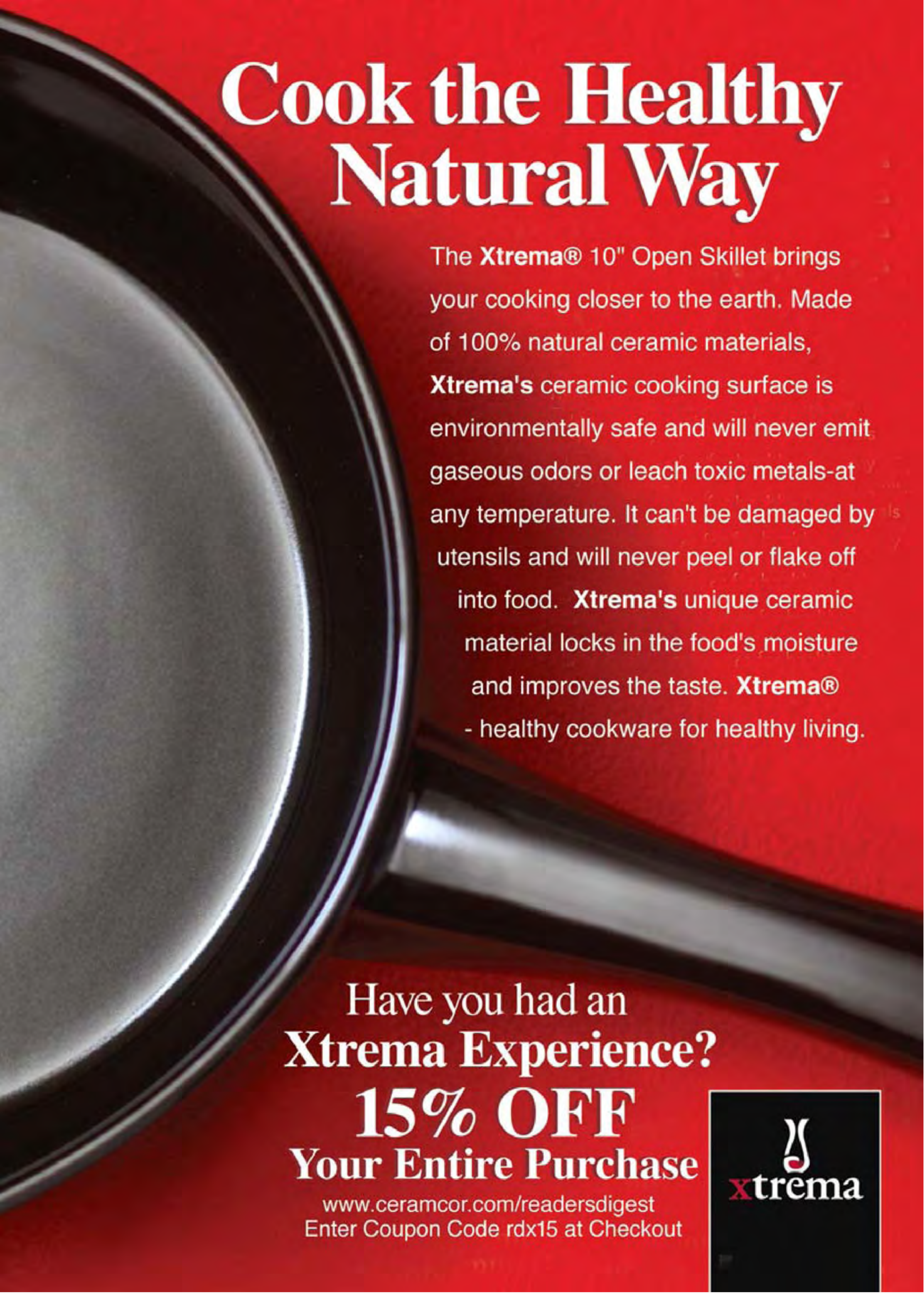
- ¾ cup unsweetened coconut milk
- 2 tbs. palm sugar or light brown sugar, or more to taste
- 1 piece (2 in.) pandanus leaf (available in Asian markets) or 1 or 2 bay leaves
- ¼ tsp. salt



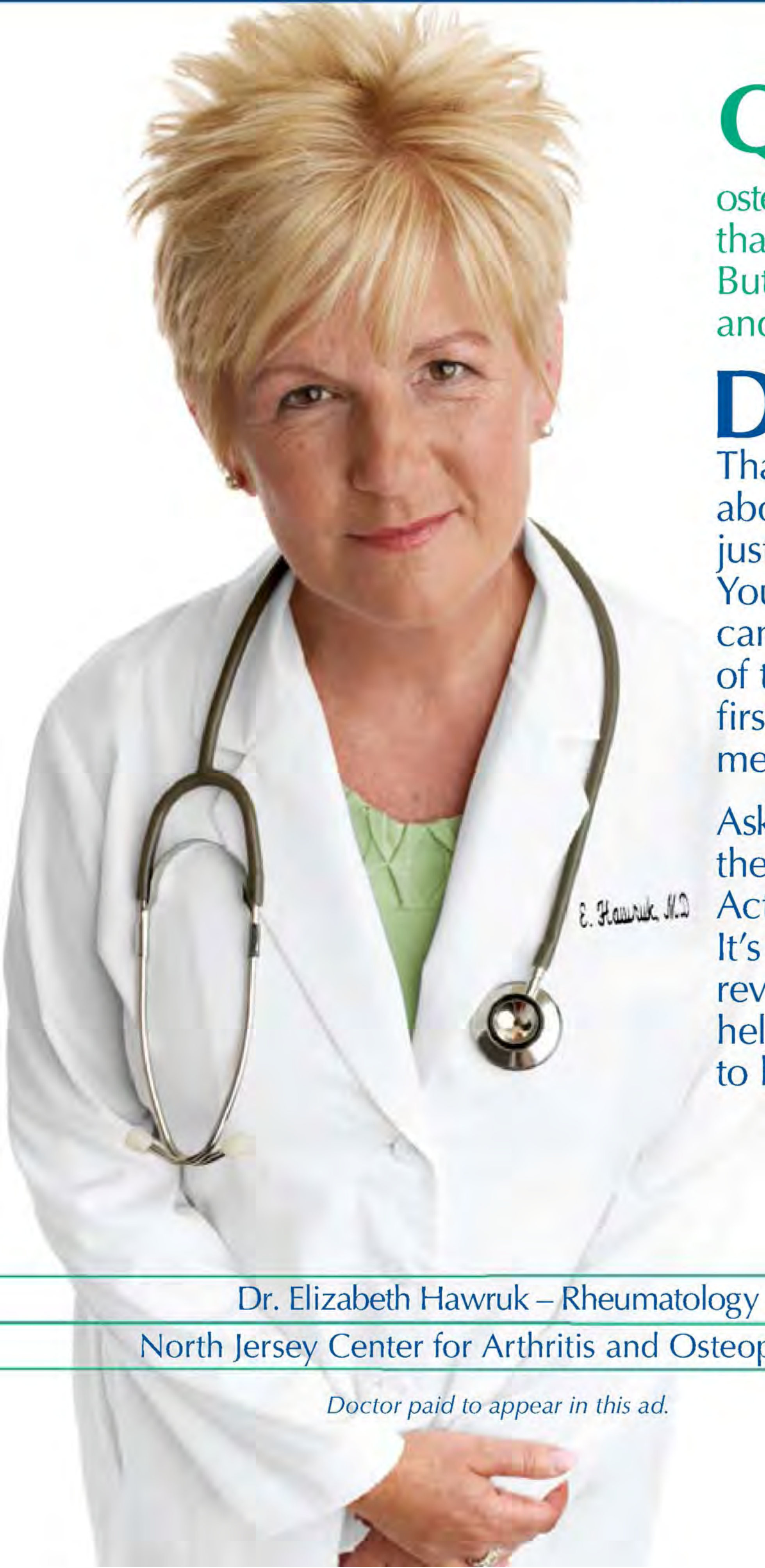
BEN FINK

- 4 ears sweet corn, husked or husk stripped back and tied together to form handle

1. Combine coconut milk, sugar, pandanus or bay leaf, and salt in small saucepan over medium heat. Let simmer gently until sugar dissolves, 3 to 5 minutes. Taste for sweetness, adding more sugar if necessary. Remove pan from heat and let mixture cool to room temperature.
2. Preheat grill to high. When ready to cook, brush grill grate clean and apply thin coat of oil to grate. Place corn on hot grate; start basting with coconut milk mixture after a few minutes. Baste several times as it grills until nicely browned on all sides, 2 to 3 minutes per side, 8 to 12 minutes in all, turning with tongs.
3. Baste corn one final time, transfer to platter or plates, and serve.


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Osteoporosis:



Q: I always thought that postmenopausal osteoporosis was just something that happened to old ladies. But I found out that I have it, and I still feel young.

Dr. Hawruk:

That is one of those myths about osteoporosis. It's not just an old ladies' disease. You should know that women can lose an average of 10% of their bone mass during the first 5 years after reaching menopause.

Ask your doctor if a prescription therapy like Once-a-Month Actonel is right for you. It's clinically proven to help reverse bone loss and can help increase bone strength to help prevent fractures.

Dr. Elizabeth Hawruk – Rheumatology

North Jersey Center for Arthritis and Osteoporosis

Doctor paid to appear in this ad.

Get The Facts

Actonel is a prescription medication to treat postmenopausal osteoporosis.

Important Safety Information for Actonel® (risedronate sodium) tablets. You should not take Actonel if you are allergic to any of the ingredients, if you have problems of the esophagus which delay emptying into the stomach, if you have low blood calcium (hypocalcemia), have kidneys that work poorly, or cannot stand or sit upright for 30 minutes. Stop taking Actonel and tell your doctor right away if you experience difficult or painful swallowing, chest pain, or severe or continuing heartburn, as these may be signs of serious upper digestive problems. Follow dosing instructions carefully to lower the chance of these events occurring.

Side effects may include stomach pain, upset stomach, or back, muscle, bone or joint pain, sometimes severe. Contact your doctor for medical advice about side effects, or if you have questions about Actonel. Promptly tell your doctor if you develop dental problems, as serious jawbone problems have been reported rarely.

You are encouraged to report side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch, or call 1-800-FDA-1088.

Please see the Actonel Patient Information on the adjoining page.

ASK Actonel®

(risedronate sodium) tablets

Once-a-Month

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Call 1-877-Actonel or visit Actonel.com

Patient Information

ACTONEL® (AK-toh-nel) Tablets
ACTONEL (risedronate sodium) tablets 5 mg, ACTONEL (risedronate sodium) tablets 35 mg, ACTONEL (risedronate sodium) tablets 75 mg, and ACTONEL (risedronate sodium) tablets 150 mg for Osteoporosis

Read this information carefully before you start to use your medicine. Read the information you get every time you get more medicine. There may be new information. This information does not take the place of talking with your healthcare provider about your medical condition or your treatment. If you have any questions or are not sure about something, ask your healthcare provider or pharmacist.

What is the most important information I should know about ACTONEL?

ACTONEL may cause problems in your stomach and esophagus (the tube that connects the mouth and the stomach), such as trouble swallowing (dysphagia), heartburn (esophagitis), and ulcers. You might feel pain in your bones, joints, or muscles (See "What are the possible side effects of ACTONEL?").

You must follow the instructions exactly for ACTONEL to work and to lower the chance of serious side effects. (See "How should I take ACTONEL?").

What is ACTONEL?

ACTONEL is a prescription medicine used:

- to prevent and treat osteoporosis in postmenopausal women.
- to increase bone mass in men with osteoporosis.
- to prevent and treat osteoporosis in men and women that is caused by treatment with steroid medicines such as prednisone.
- to treat Paget's disease of bone in men and women. The treatment for Paget's disease is very different than for osteoporosis and uses a different dose of ACTONEL. This leaflet does not cover using ACTONEL for Paget's disease. If you have Paget's disease, ask your healthcare provider how to use ACTONEL.

ACTONEL may reverse bone loss by stopping more loss of bone and increasing bone strength in most people who take it, even though they won't be able to see or feel a difference. ACTONEL helps lower the risk of breaking bones (fractures). Your healthcare provider may measure the thickness (density) of your bones or do other tests to check your progress.

Who should not take ACTONEL?

Do not take ACTONEL if you:

- have problems of the esophagus which delay emptying
- have low blood calcium (hypocalcemia)
- cannot sit or stand up for 30 minutes
- have kidneys that work poorly
- have an allergy to ACTONEL. The active ingredient in ACTONEL is risedronate sodium. (See the end of this leaflet for a list of all the ingredients in ACTONEL.)

Tell your doctor before using ACTONEL if:

- you are pregnant or may become pregnant. We do not know if ACTONEL can harm your unborn child.
- you are breast-feeding or plan to breast-feed. We do not know if ACTONEL can pass through your milk and if it can harm your baby.
- you have kidney problems. ACTONEL may not be right for you.

Tell your doctor about all the medicines you take, including prescription and non-prescription medicines, vitamins and herbal supplements. ACTONEL can interact with other medicines. Keep a list of all the medicines you take. Show it to all your healthcare providers, including your dentist and pharmacist, each time you get a new medicine.

How should I take ACTONEL?

The following instructions apply to all patients taking ACTONEL:

- Take ACTONEL exactly as prescribed by your healthcare provider.
- Take ACTONEL first thing in the morning before you eat or drink anything except plain water.
- Take ACTONEL while you are sitting up or standing.
- Take ACTONEL with 6 to 8 ounces (about 1 cup) of plain water. Do **not** take it with any other drink besides plain water.
- Swallow ACTONEL whole. **Do not chew** the tablet or keep it in your mouth to melt or dissolve.
- After taking ACTONEL you must wait at least 30 minutes
  BEFORE:
  - lying down. You may sit, stand, or do normal activities like read the newspaper or take a walk.
  - eating or drinking anything except plain water.
  - taking vitamins, calcium, or antacids. Take vitamins, calcium, and antacids at a different time of the day from when you take ACTONEL.
- Keep taking ACTONEL for as long as your healthcare provider tells you.
- For ACTONEL to treat your osteoporosis or keep you from getting osteoporosis, you have to take it exactly as prescribed. If you miss a dose of ACTONEL, call your healthcare provider for instructions.
- If you take more than your prescribed dose of ACTONEL, call your healthcare provider right away.
- Your healthcare provider may tell you to take calcium and vitamin D supplements and to exercise.

What is my ACTONEL schedule?

ACTONEL tablets are made in 4 different dosages (amounts). How often you should take your tablet depends upon the dosage that your doctor has prescribed (recommended) for you.

- 5 mg tablets are yellow. One tablet should be taken every day in the morning.

- 35 mg tablets are orange. One tablet should be taken once a week in the morning.
- 75 mg tablets are pink. One tablet should be taken in the morning two days in a row every month.
- 150 mg tablets are blue. One tablet should be taken once a month in the morning.

If you miss your dose in the morning, do not take it later in the day. You should call your healthcare provider for instructions.

What should I avoid while taking ACTONEL?

- Do not eat or drink anything except water before you take ACTONEL and for at least 30 minutes after you take it. See "How should I take ACTONEL?".
- Do not lie down for at least 30 minutes after you take ACTONEL.
- Foods and some vitamin supplements and medicines can stop your body from absorbing (using) ACTONEL. Therefore, do not take anything other than plain water at or near the time you take ACTONEL.

What are the possible side effects of ACTONEL?
Stop taking ACTONEL and tell your healthcare provider right away if:

- swallowing is difficult or painful
- you have chest pain
- you have very bad heartburn or it doesn't get better

Possible serious side effects may include:

- esophagus or stomach problems, including ulcers, pain, or trouble swallowing. Tell your healthcare provider if you have pain or discomfort in your stomach or esophagus.
- low calcium and other mineral disturbances. If you already have one (or more) of these problems, it should be corrected before taking ACTONEL.
- pain in bones, joints or muscles, sometimes severe. Pain may start as soon as one day or up to several months after starting ACTONEL.
- jawbone problems in some people, which may include infection and slower healing after teeth are pulled. Tell your healthcare providers, including your dentist, right away if you have these symptoms.

Common side effects include the following:

- back and joint pain
- upset stomach and abdominal (stomach area) pain
- short-lasting, mild flu-like symptoms, which are reported with the monthly doses and usually get better after the first dose.

Other possible side effects may include:

- **Allergic and severe skin reactions.** Tell your healthcare provider if you develop any symptoms of an allergic reaction including: rash (with or without blisters), hives, or swelling of the face, lips, tongue, or throat. **Get medical help right away if you have trouble breathing or swallowing.**
- **Eye inflammation.** Tell your healthcare provider if you get any eye pain, redness, or if your eyes become more sensitive to light.

Call your doctor for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088.

How should I store ACTONEL?

- Store ACTONEL between 68°F to 77°F (20°C to 25°C).
- **Keep ACTONEL and all medicines out of the reach of children.**

General information about ACTONEL:

Medicines are sometimes prescribed for conditions that are not mentioned in patient information leaflets. Do not use ACTONEL for a condition for which it was not prescribed. Do not give ACTONEL to other people, even if they have the same symptoms you have. It may harm them.

What if I have other questions about ACTONEL?

This leaflet summarizes the most important information about ACTONEL for osteoporosis. If you have more questions about ACTONEL, ask your healthcare provider or pharmacist. They can give you information written for healthcare professionals. For more information, call 1-877-ACTONEL (toll-free) or visit our web site at www.ACTONEL.com.

What are the ingredients of ACTONEL?

ACTONEL (active ingredient): risedronate sodium.
ACTONEL (inactive ingredients):
All dose strengths contain: crospovidone, hydroxypropyl cellulose, hypromellose, magnesium stearate, microcrystalline cellulose, polyethylene glycol, silicon dioxide, titanium dioxide.

Dose-strength specific ingredients include:
5 mg—ferric oxide yellow, lactose monohydrate; 30 mg—lactose monohydrate; 35 mg—ferric oxide red, ferric oxide yellow, lactose monohydrate; 75 mg—ferric oxide red; 150 mg—FD&C blue #2 aluminum lake.

ACTONEL® is marketed by:
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sanofi-aventis U.S. LLC
Bridgewater, NJ 08807

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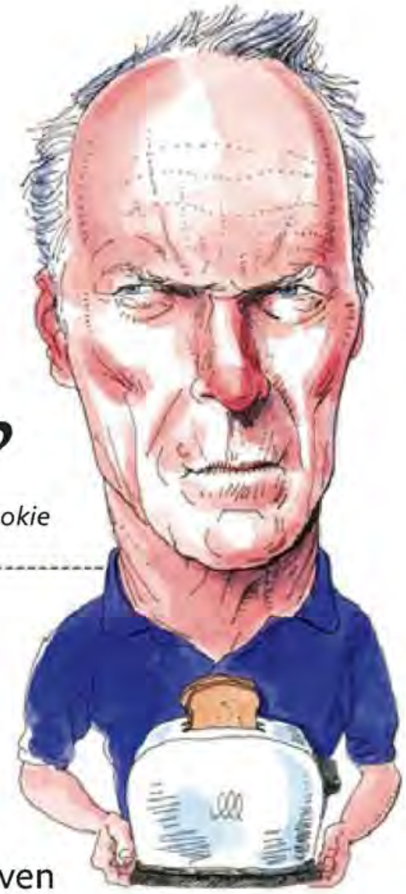
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Quotes



If you want a guarantee, buy a toaster.

Clint Eastwood, in *The Rookie*

A healthy male adult bore consumes each year one and a half times his own weight in other people's patience.

John Updike, "Confessions of a Wild Bore"

Don't just stand there; make something happen.

Lee Iacocca, *Iacocca: An Autobiography*

On your way to Wonderful, you're going to have to pass through All Right. And when you get to All Right, take a good look around and get used to it, 'cause that may be as far as you're going to go.

Bill Withers, *Still Bill*

It is our responsibilities, not ourselves, that we should take seriously. *Peter Ustinov*

There is a plan to this universe. There is a high intelligence, maybe even a purpose, but it's given to us on the installment plan.

Isaac Bashevis Singer, *Conversations*

Happiness is nothing more than good health and a bad memory. *Albert Schweitzer*

Grief is the price we pay for love.

Queen Elizabeth II

Hard work spotlights the character of people: Some turn up their sleeves, some turn up their noses, and some don't turn up at all. *Sam Ewing,* radio announcer



Got That?

The measure of achievement is not winning awards. It's doing something that you appreciate, something you believe is worthwhile. I think of my strawberry soufflé. I did that at least 28 times before I finally conquered it.

Julia Child

MICHAEL GRECCO/HULTON ARCHIVE/GETTY IMAGES; ILLUSTRATED BY JOE CIARDIELLO

Word Power

EMILY COX & HENRY RATHVON

Words should be weighed, not counted, goes the Yiddish proverb. Of the thousands of words English has borrowed from other languages, Yiddish loanwords are perhaps the weightiest. How many other nouns pack the precision, sarcasm, humor, and onomatopoeia into seven letters that *schlump* (sloppy dresser) does? For quiz answers, **turn the page**.

1. kvetch ('kvech) *v.*—A: cook. B: complain. C: boast.

2. zaftig ('zahf-tig) *adj.*—A: pleasantly plump. B: giddy. C: curious.

3. chutzpah ('hoot-spuh) *n.*—A: sudden attack. B: filled crepe. C: gall.

4. yenta ('yen-ta) *n.*—A: busybody. B: matchmaker. C: rabbi's wife.

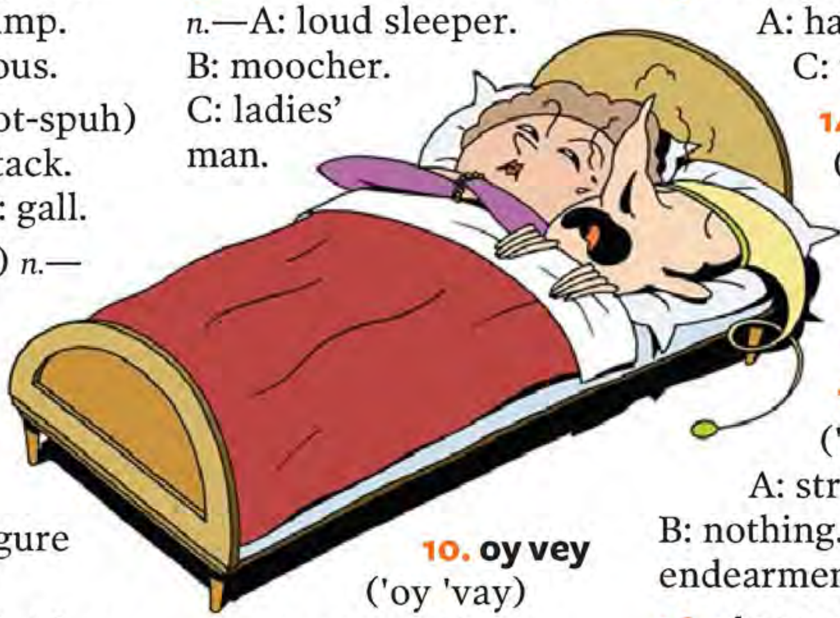
5. plotz ('plots) *v.*—A: measure. B: figure out. C: collapse.

6. meshuga (muh-'shoog-uh) *adj.*—A: worthless. B: too sweet. C: daffy.

7. nebbish ('neb-ish) *n.*—A: elegantly dressed man. B: milquetoast. C: smart aleck.

8. tchotchke ('chach-kuh) *n.*—A: folk dance. B: bad memory. C: knickknack.

9. schnorrer ('shnor-ur) *n.*—A: loud sleeper. B: moocher. C: ladies' man.



10. oy vey ('oy 'vay) *interj.*—A: Happy birthday! B: Hip hip hooray! C: Oh, woe!

11. kibitz ('kib-its *or* kuh-'bits) *v.*—A: clean obsessively. B: tell jokes. C: offer opinions.

12. mensch ('mench) *n.*—A: coward. B: honorable person. C: ne'er-do-well.

13. schlep ('shlep) *v.*—A: haul. B: insult. C: weep.

14. nudnik ('nood-nik) *n.*—A: first-year student. B: bumpkin. C: bore.

15. bubkes ('bup-cuss) *n.*—A: stroke of luck. B: nothing. C: term of endearment.

16. shamus ('shah-mus *or* 'shay-) *n.*—A: detective. B: hoax. C: free-for-all.

17. mazel tov ('mah-zul 'tov) *interj.*—A: Sorry—my bad! B: Welcome home! C: Best wishes!

Sound Smarter

Anyone who watched TV in the late '70s remembers Laverne and Shirley skipping down a Milwaukee street, chanting, **"Schlemiel! Schlimazel! Hasenpfeffer Incorporated!"** A schlemiel is a clumsy fool; a schlimazel is a magnet for bad luck. But Yiddish makes a fine distinction between these two comically hapless people. A schlemiel is the bumbling traveler who spills soup (say, hasenpfeffer, a rabbit stew) on a fellow passenger; a schlimazel is the poor slob wearing the soup.

ILLUSTRATED BY INGO FAST



7. nebbish—*[B]* milquetoast. A *nebbish* in an ill-fitting suit, the accountant nervously said "excuse me" to the coworker blocking the fax machine.

8. tchotchke—*[C]* knickknack. Among the yard sale *tchotchkes*, there it was: Punchers the Lobster, one of the original Beanie Babies.

9. schnorrer—*[B]* moocher. That *schnorrer* Artie always forgets his wallet when we eat out.

10. oy vey—*[C]* Oh, woe! Dad got out of the car, looked at the flat tire, and said, "*Oy vey*!"

Answers

1. kvetch—*[B]* complain. If Bernice *kvetched* about her friends less, she might have more of them.

2. zaftig—*[A]* pleasantly plump. The *zaftig* beauty was the first plus-size contestant to win *America's Next Top Model*.

3. chutzpah—*[C]* gall. After jumping the light, the other driver had the *chutzpah* to blame me for the accident.

4. yenta—*[A]* busybody. The office romance provided irresistible fodder for the watercooler *yentas*.

5. plotz—*[C]* collapse. When my mom sees my report card, she'll *plotz*.

6. meshuga—*[C]* daffy. My *meshuga* neighbor has dressed his garden gnomes in flak jackets.

11. kibitz—*[C]* offer opinions. Jane does more *kibitzing* than helping.

12. mensch—*[B]* honorable person. The mayor is a *mensch*—respected even by those who disagree with him.

13. schlep—*[A]* haul. Lois *schlepped* the newspapers to the recycling center, realizing much later that she'd tossed her husband's prize baseball card collection.

14. nudnik—*[C]* bore. Don't look now, but here comes that *nudnik* from the IT department.

15. bubkes—*[B]* nothing. They went to Vegas with a bundle and came back with *bubkes*.

16. shamus—*[A]* detective. You don't have to be a *shamus* to figure out that the e-mail is a scam.

17. mazel tov—*[C]* Best wishes! You got the job? *Mazel tov*!

Deep Roots

If someone tells you, "Don't give me the whole megillah," he means, "Cut a long story short." In Hebrew, *megillah* means "scroll" and often refers to the biblical Book of Esther—read aloud, in full, twice, during the festival of Purim.

VOCABULARY RATINGS

• 9 and below: schlub • 10–13: maven • 14–17: macher

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- ✓ Constipation
- ✓ Back Pain
- ✓ High Blood Pressure
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- ✓ Poor Circulation
- ✓ Obesity
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- ✓ Insomnia
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- ✓ Diabetes
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- ✓ Knee Pain
- ✓ Spinal Stenosis
- ✓ Lymphedema
- ✓ Lack of Energy



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Increase circulation throughout the body



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Customer Feedback

I have had such lower back pain that I could hardly stand it. I saw your ad two years ago and thought it wouldn't help me. But, I ordered one anyway. I have used it for four months now. I have very little back pain, am more regular, and I sleep much better thanks to the Exerciser 2000. *—C. Cordes*

Little did I know when I ordered the Exercise 2000 Elite® that it would prove valuable to my wife of 62 years. I got it for the stiffness in my legs and it works perfectly to get me loosened up after playing tennis in the morning. When I come home I immediately get on the Exerciser 2000 Elite® for ten minutes and I feel great! My wife suffers from restless leg syndrome at night. Instead of walking the floor for a long period of time, she just gets on the Exerciser for ten minutes and the symptoms subside. After wrestling with restless legs for a long time she is all smiles in the morning. Happy days are here again! Just thought you would like to know. *—Dick P.*

I am 76 years old, heavy, stiff with arthritis and a leukemic for the past nine years. Using your machine twice a day has made me feel ten years younger. I also have a great deal more energy. When you say that your company is in the business of "helping people feel better", it is no fib! *—Kate B.*

I am 97 years old and have edema in my left foot and leg. My daughter saw the Exerciser 2000 in an ad and encouraged me to try it. It is helping a lot and I feel alive again. Thank you!—Grace R.

I have loved your product for many years now and couldn't live without one. It truly is the best product on the market…and I would never pay a person to do what this does better. You have the control of it all…and I love that. It definitely pays for itself many times over!! *—Kathy C.*

I am an 88 year old woman with multiple health problems. After seeing the ad for the Exerciser 2000 Elite® I ordered it and use it daily. I can tell it has improved circulation in my legs and by doing that it has helped my balance and walking problems. To those of you that think that you can't do regular exercise anymore, try this piece of equipment and you will be amazed how much better you will feel. *—Mildred F.*

As a Chiropractor, I would say the Exerciser 2000 enables people to benefit themselves at home. It is a valuable asset in moving lymph fluid, oxygenating the blood, increasing immune system function, maintaining mobility in the spine, and freeing up a spine that had become stiff and arthritic. *—Garry G., D.C.*



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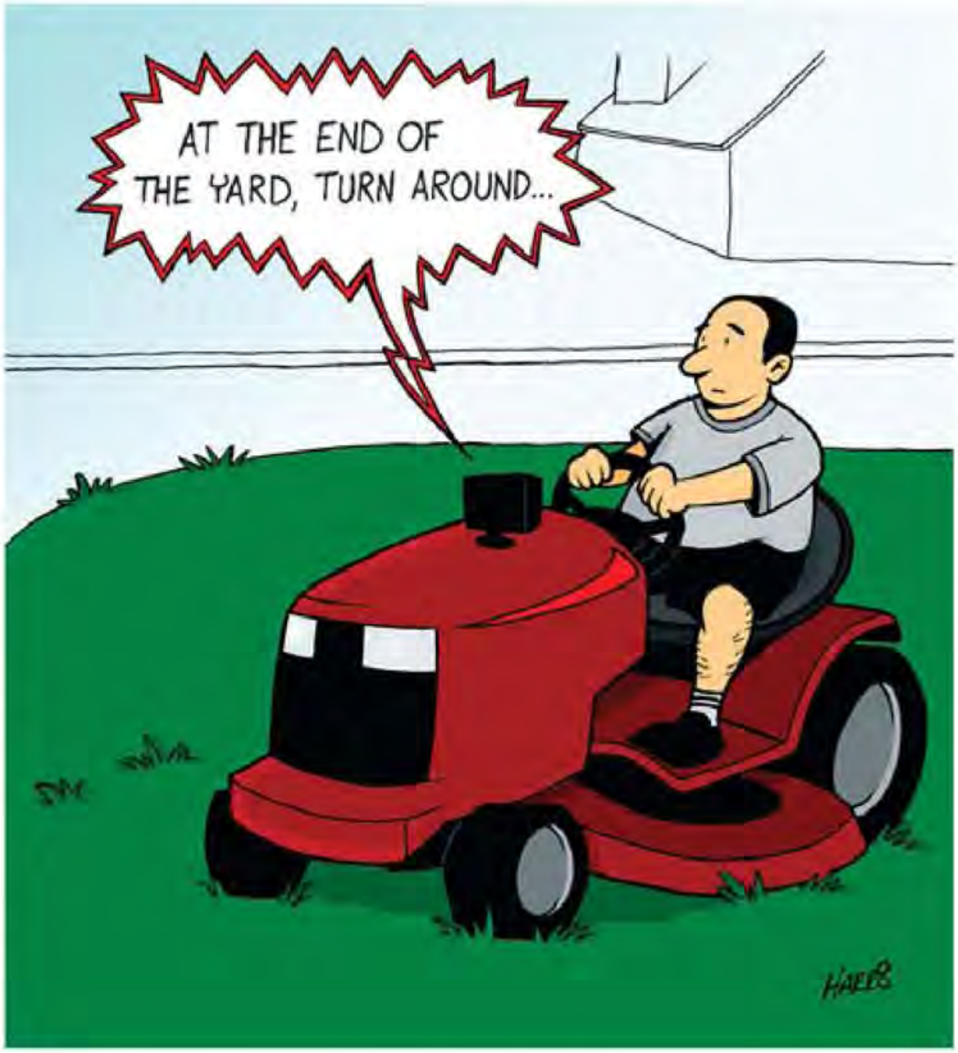
Life

As I picked out flowers for my mother, I noticed a man next to me juggling three boxes of candy and a large bouquet.

"What did you do wrong?" I said with a laugh.

He mumbled back, "I got married."

Brenda Rhodes, Marietta, Georgia



Mind Speaking Up?

Anyone can eavesdrop, but not everyone thinks to record conversations for posterity. We thank those snoopers who alerted overheardinnewyork.com to these:

Guy: Your glasses can't be bad—you just got them!
Girl: Yeah, but I cheated on the eye exam, so it's really my own fault.
Guy: That's the stupidest thing I've ever heard.
Girl: I'm very competitive.

Girl: Why would he say that I was not educated?
Friend: Well, that's not exactly what he said, now, was it?
Girl: No. He said I was tapid and voided of thought.
Friend: Vapid and devoid of thought.
Girl: Same thing.

Girl #1 (picking up box of baking soda): I didn't know soda was baked.
Girl #2: Thank God it's not fried! Do you know how many extra calories that would be?!

We were shopping for clothes when my 13-year-old daughter spotted a hat with "Guinness" written on it. She put it on and proclaimed, "Look! I'm a genius!"
Laura Sandoval, Weed, California

ILLUSTRATED BY T. RUSSELL HARRIS

The waitress was refilling cups of coffee when she stopped at the table next to ours. "Regular?" she asked her customer.

"Yes, thank you," said the man. "Due to a steady diet of fruit."

Janet Lundquist, Lake Stevens, Washington

A friend and I were watching a film when a character called another a nymphomaniac.

"What's that mean?" she asked.

"It's a female who's addicted to sex," I answered.

"What do they call males who are addicted to sex?"

"Men."

Andra DeAngelis, Harker Heights, Texas

The Mexican restaurant looked great. Only one problem: It wasn't open. So I jotted down the name for another day. Just then, a man came out of the restaurant and took a peek at what I'd written.

"That's not the name of the restaurant," he said, pointing to the sign over the door. "That's Spanish for 'closed on Mondays.'"

Bettie Wright, Surprise, Arizona

Closed-captioning still needs to iron out some kinks. A local news story regarding school closures declared: "The Cleveland Metropolitan School District is holding a nude conference. It promises to be quite an emotional event."

Linda Titera, Westlake, Ohio

During our priest's sermon, a large plant fell over right behind the pulpit, crashing to the ground. Acknowledging his reputation for long-windedness, he smiled sheepishly and said, "Well, that's the first time I actually put a plant to sleep."

David Berger, Troy, Ohio

TIMES ARE TOUGH—STILL ...



Submitted by *Connie Kerr,* spotted in Northridge, California

Your favorite new joke, funny anecdote, or crazy news story might be worth $$$. See page 83 for details.

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